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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements. Open-to-Public Inspection

A F	or the	2008 calendar year, or tax year beginning SEP 1, 2008 and ending	AUG 31, 2009
В	zneck il ipplicable	Ptease C Name of organization	D Employer identification number
Г	Addres		
	Name Change	tune	86-0684848
	initial Jetum	See Number and street (or P.O. box if mail is not delivered to street address) Room/sur	ite E Telephone number
$\bar{\Box}$	Termin	Creamfort	602-343-8324
T	Amend		G Grass receipts \$ 1,092,049.
Ē	Applica		H(a) Is this a group return
`	pendin	F Name and address of principal officer STEVEN ZYLSTRA	for affiliates? Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates included? Yes No
			If "No," attach a list. (see instructions)
		e: AZTECHCOUNCIL. ORG organization: X Corporation Trust Association Other Lye	H(c) Group exemption number
			ar of formation 2002 M State of legal domicile: AZ
		Summary	
9		Briefly describe the organization's mission or most significant activities: TO CONNEC	
Governance		SUPPORT THE STATE'S EXPANDING TECHNOLOGY INDU	
ē		Check this box 🕨 🔲 if the organization discontinued its operations or disposed of ma)
Š		Number of voting members of the governing body (Part VI, line 1a),	
8		Number of independent voting members of the governing body (Part VI, line 1b)	
es	5	Total number of employees (Part V, line 2a)	
Activities	6	Total number of volunteers (estimate if regressival REVENUE SERVICE	6
ij	7a	Total gross unrelated business revenue from Part MEDE 12,50 umn (C)	
_	<u>b</u> 1	Net unrelated business taxable income from Form 990-T, line 34	76 0.
		FEB 22 2011	Prior Year Current Year
•		Contributions and grants (Part VIII, line 1h)	342,602. 345,372.
Š	9	Program service revenue (Part VII), line 2 TRVICE CENTER DIRECTOR	478,895. 583,756.
Revenue	10	Program service revenue (Part VIII, line 2 FINCE CENTER DIRECTOR COVINGTON, KY Investment income (Part VIII, column (A), lines 3, ALARD ONIT. #.28	2,884. 397.
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	135,026. 162,524.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	959,407. 1,092,049.
		Grants and similar amounts paid (Part IX, column (A), lines 13)	23373070 270230
	1	Benefits paid to or for members (Part IX, column (A), line 4)	
zň.	l	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)	425,944. 593,428.
Expenses	162	Professional fundraising fees (Part IX, column (A), line 11e)	123,344.
Ę.	103	Total fundraising expenses (Part IX, column (D), line 25)	<u> </u>
Ä	1.5		564,757. 570,634.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f 24f)	000 701 1 164 063
	l .	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	990,701. 1,164,062.
	19	Revenue less expenses. Subtract line 18 from line 12	-31,294. $-72,013.$
sets or	l		Beginning of Year End of Year
988	20	Fotal assets (Part X, line 16)	283,882. 200,153. D
Net As	21	Total liabilities (Part X, line 26)	28,835. 17,119. 255,047. 183,034. 18, and to the best of my knowledge and belief, it is true, correct, ige.
		Net assets or fund balances Subtract line 21 from line 20	255,047. 183,034. C
P	art II	Signature Block	
		Under penalties of persury, I declare after I have examined this return, including accompanying schedules and statement and complete. Declaration afpreparer (other than officer) is based on all information of which preparer has any knowled	is, and to the best of my knowledge and belief, it is true, correct, ge.
	l	/4 1	1 - 1.01
Sig	n		Date 2/17/2011
Her	e	Signature of officer	Date .
	ì	STEVEN ZYLISTRA, PRESIDENT/CEO	
		Type or print name and tyle	<u>, , , , , , , , , , , , , , , , , , , </u>
Paid	. 1		Check If Preparer's identifying number (see instructions)
_		signature CPA 2/17/11	employed
•	Sier's	Firm's name (or CLIFTON GUNDERSON LLP yours if	EIN >
use	Only	self-employed. 3003 N CENTRAL AVE., STE 500	C C
	}	DP+4 PHOENIX, AZ 85012	Phone no. ▶ 602-266-2248
May	the IF	S discuss this return with the preparer shown above? (see instructions)	X Yes No
	01 12-18		

SCANNED MAY 2 % 2011

	990 (2008) ARIZONA TECHN t III Statement of Program Service Acc		86-068	4848 Page 2
		ompusimients (see instructions)		
1	Briefly describe the organization's mission.	aunnana aun amemala nu	DANDENC #ECIDIO	7.001
	TO CONNECT, REPRESENT AND	SUPPORT THE STATE'S EX	PANDING TECHNO	LUGY
	INDUSTRY.			
				
2	Did the organization undertake any significant progra	am services during the year which were not li	sted on	
_	the prior Form 990 or 990-EZ?			Yes X No
	If "Yes", describe these new services on Schedule C			
3	Did the organization cease conducting, or make sign		ram services?	Yes X No
3	If "Yes", describe these changes on Schedule O.	mount dranges at now it conducts, any prog		Lanes Carino
4	Describe the exempt purpose achievements for each	h of the organization's three largest program.	services by expenses	
•	Section 501(c)(3) and 501(c)(4) organizations and se			
	allocations to others, the total expenses, and revenu			
			 	
4a	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	ARIZONA TECHNOLOGY COUNCIL			
	FEATURED PROGRAMS AND GUES			
	ALSO SPONSORED A NUMBER OF	SPECIAL INTEREST GROU	<u>PS WHICH ALLOW</u>	ED IN
	DEPTH DISCUSSIONS RELATED	TO CURRENT TECHNOLOGY	AND NETWORKING	AMONGST
	MEMBERS. AZTC ALSO HAS AN	INFORMATION FILLED WE	BSITE.	
				·
				
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$	
40	(Code) (Cybenzes &	including grants of ϕ) (Hevenide w	,
				
				. الاراد
			-	- W
				7 3 PAGE
				
				
				
				崔
				, · (4
4c	(Code.) (Expenses \$	including grants of \$) (Revenue \$	``````````````````````````````````````
				· · · · · · · · · · · · · · · · · · ·
4d	Other program services (Describe in Schedule O.)	Manage	•	التي يرجع "
	(Expenses \$ including grant	ts of \$) (Revenue \$ (Must equal Part IX, Line 2	% cohuma (P) \	
<u>4e</u>	Total program service expenses ▶ \$	(must equal rait iX, Line 2	o, column (aj.)	Form 990 (2008)
13200 12-18	} 09			•
z- 18	JO.	2		948, 682
		4		

Form 990 (2008) ARIZONA TECHNOLOGY COUNCIL
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X_
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	<u>X</u>	L
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u>x</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X_
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		_X_
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?	٠,:	- •	1
	If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	_11	X	_
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		X.
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ية آد_ ـ	-X-3
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14à		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		٠.	16-16-6
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b	,	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			22.1
	located outside the United States? If "Yes," complete Schedule F, Part II	15	L	_ x_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X_
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Ord the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? // "Yes," complete Schedule J	23	X	<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			, s
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			
	If 'No', go to question 25	24a		X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	* 1	79
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			15/1
	any tax-exempt bonds?	24c		
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25á	A	(20)
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			A Parage
	pnor year? If "Yes," complete Schedule L, Part I	25b		流動
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified		,	:43
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			{
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
		Form	990	(2008)

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Part IV Checklist of Required Schedules (continued)

Yes No During the tax year, did any person who is a current or former officer, director, trustee, or key employee: 28 Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV X 28a b Have a family member who had a direct or indirect business relationship with the organization? X 28b c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Х 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? 34 If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Form 990 (2008)

			T.,	
10	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	$\overline{}$	Yes	No
14	U.S. Information Returns, Enter -0- if not applicable	ام		
ь		ă		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4	1	
·	(gambling) winnings to prize winners?	10	x	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1		
	filed for the calendar year ending with or within the year covered by this return 2a 1	4		
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1 26	x	
_	Note. If the sum of fines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	many the second of the second	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	-33	1	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and	1		
	Financial Accounts.	1		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	,	X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited		(· · ·
	Tax Shelter Transaction?	5c	<u> </u>	
6a	Did the organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	ļ	1 . 5-	机气流
	were not tax deductible?	6b	<u> </u>	
7	Organizations that may receive deductible contributions under section 170(c).	}		15 £
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a	<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	~ 7b	<u> </u>	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	1		
	to file Form 8282?	7c	<u> </u>	<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year	╣		
6	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1_	1	
	benefit contract?	7e	<u> </u>	
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		1
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7g	 	
8 8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)	7h		
J	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have	1	}	
	excess business holdings at any time during the year?	8	,	,
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	1-		
a	Did the organization make any taxable distributions under section 4966?	9a	1	٠.
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		- ; ,
10	Section 501(c)(7) organizations. Enter: N/A		-	
a	Initiation fees and capital contributions included on Part VIII, line 12	}	1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities]		
11	Section 501(c)(12) organizations. Enter: N/A	1	1	
а	Gross income from members or shareholders		1	
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1	[· \$ -3.4
	amounts due or received from them)	J., , ,	٠, ١	برين پرين
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1,5	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A . 12b	ــــــــــــــــــــــــــــــــــــــ	<u> </u>	<u> </u>
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Form 990 (2008)

ARIZONA TECHNOLOGY COUNCIL

B6-0684848

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Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions		1	
1a	Enter the number of voting members of the governing body			
ь	Enter the number of voting members that are independent		1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		_X_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X_	
b	Each committee with authority to act on behalf of the governing body?	න	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a	X	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			- 1
	and branches to ensure their operations are consistent with those of the organization?	9b	х	i nita.
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			1 3
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10		Х
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		X
Sec	tion B. Policies		-1: ÷	F4 [Z]
	•		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	,
ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			1° 4
	to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12¢	X	. ~
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	<u>1</u> 4		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			1.
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
а	The organization's CEO, Executive Director, or top management official?	15a		X
b	Other officers or key employees of the organization?	15b	آب.	X
	Describe the process in Schedule O. (see instructions)			_
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		<u>X</u>
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			Ţ
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's		•	
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►AZ			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-7 (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request		- ' '	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, as	nd fina	- incial	
	statements available to the public.		,	海岸が
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	ion:	·	
	JAMY BATTLE - 602-343-8324			
	2 N CENTRAL AVE #750, PHOENIX, AZ 85004			
9200				

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W 2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average		1)) Posi	•			(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	director		all t	ihat	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
MICHAEL BERENS				\vdash			-			2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
CHAIRMAN EMERITUS	1.00	X		X	┡	<u> </u>	<u> </u>	0.	0.	0.
KEVIN MCHOLLAND				l	l					_
TREASURER	1.00	X	!	X	ļ	ļ	├	0.	0.	- 0.
RAY HARRIS		l	Ì	١		ļ				_
SECRETARY	1.00	X	 —	X	<u> </u>	-	 	0.	0.	0.
STEVE PHILLIPS	1			l		1				
CHAIRMAN	1.00	X	-	X		┢	 	0.	0.	0.
DAVIS AIRES	1	١		1			ļ			
DIRECTOR	1.00	X	├-		┞	<u> </u>	 	0.	0.	0.
TODD BANKOFIER	1	١	1	1	1					1.71
DIRECTOR	1.00	X	├-	-	-	-	-	0.	0.	0.
DAVID BEAUCHAMP	1 1 00						1			
DIRECTOR	1.00	X	⊢	 	-	-	⊢	0.	0.	0.
FREDRICK BELLAMY	1.00	x					ł	0.	0.	0
DIRECTOR	1.00	 ≏	-	⊢	\vdash	-	├		0.	<u>U`</u>
PAUL BURNS	1.00	l.					1	0.	0.	_
DIRECTOR THOMAS CAMPBELL	1.00	┢	╁	├	-	╁	⊢	· · · · · · · · · · · · · · · · · · ·	0.	0.
DIRECTOR	1.00							0.	٥.	44.00
JOANNE CARTHEY	1.00	10	┢	├	\vdash	╁─╴	-	 	<u> </u>	70
DIRECTOR	1.00	x	1	l				0.	٥.	
KATHY COLLINS	1.00	^	├-	╫	⊢	┢	H	· · · · · · · · · · · · · · · · · · ·	<u> </u>	7 5 U 3
DIRECTOR	1.00	x						0.	٠٥.	0.
JOHN CUMMERFORD	100	^	一	├~	-	╁╴	┢		<u> </u>	<u>v.</u>
DIRECTOR	1.00	x						l o.	٥.	n.
JOE DRAZEK	1.00	1		 	一	┢	\vdash	 	<u> </u>	
DIRECTOR	1.00	x	1	}			1	0.	0.	o.
MARK GOLDSTEIN		†	一	 		1	✝	† · · · · · ·	ļ .	l
DIRECTOR	1.00	x		1	ļ			0.	0.	0.
MARYANN GUERRA		1		T	T		1	1	<u> </u>	<u> </u>
DIRECTOR	1.00	$ _{\mathbf{x}}$	1		ĺ			0.	0.	0.
DON HENNINGER		T			1	1	T	<u> </u>		
DIRECTOR	1.00	\mathbf{x}				ļ	1	0.	i o.	0.
832007 12-18-08				•						Form 990 (2008

D-AVIII	FECTINODA	<u> </u>	<u>. </u>	<u>. U</u>	274	<u></u>			00-0004	040 Page 0
Part VII Section A. Officers, Directors, Tru		nple	oyee			High	<u>iest</u>			
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	١.	-		rtion	-		Reportable	Reportable	Estimated
	hours	ြင	heck	all	that	app	oly)	compensation	compensation from related	amount of
	per week	흃						from the	organizations	other compensation
	Wock	훃		ŀ		Ē	l	organization	(W-2/1099-MISC)	from the
		şe	truste			100		(W-2/1099-MISC)		organization
		7	ls not		S S					and related
		individual trustes or director	institutional trustee	Officer	Key employee	Highest compensated	S me			organizations
CHARLES JIRAUCH							Γ			
DIRECTOR	1.00	X	Ш	_	L		L	0.	0.	0.
NOAH KROLOFF				1	1					
DIRECTOR	1.00	X	L		L		L	0.	0.	0.
STEVE LAWRENCE	i				1					
DIRECTOR	1.00	X			L			0.	0.	0.
CHARLES T. LAYNE	i									
DIRECTOR	1.00	X	<u> </u>		L		<u> </u>	0.	0.	0.
ROD LENNIGER		İ								
DIRECTOR	1.00	X		_	$ldsymbol{f eta}$	1		0.	0.	0.
BOB LEPORE			ļ		l					
DIRECTOR	1.00	X	<u> </u>	<u> </u>	Ļ	<u> </u>	L	0.	0.	0.
MICHAEL LUPIEN				ŀ			1			ا م گهراه
DIRECTOR	1.00	X	ļ	<u> </u>	ــــــــــــــــــــــــــــــــــــــ	<u> </u>	1_	0.	0.	2.0
CARL LYTIKAINEN	1			l						
DIRECTOR	1.00	X	ļ	<u> </u>	↓_	_	↓_	0.	0.	0.
DAN MAZZOLA		l		i		Ì			_	_
DIRECTOR	1.00	X	_		↓	ļ	<u> </u>	0.	0.	0.
JOH MCGARITY		l	Ì	l			l			ت ″داده م
DIRECTOR	1.00	X	l	l	<u></u>	1	<u> </u>	0.	0.	0.
1b Total		<u> </u>	<u> </u>		<u></u>	<u> </u>		213,231.	0.	3,898.
2 Total number of individuals (including those	in 1a) who re	ceiv	ed n	nore	tha	IN \$1	,000	000 in reportable	*************************************	· 一元 中华 [7] [14]
compensation from the organization									<u></u> ▶	I Voc I No

		-			
	compensation from the organization				_
			Yes	No	
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	ه وک	. X.	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X	·	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5	717	X	
Sac	tion B. Independent Contractors				Ī

1	Complete this table for	your five highest compensated independent contractors that received more than \$100,000 of compensation from
	the organization.	NONE

(A) Name and business address	(B) Description of services	(C) Compensation
		90 10 a
		The state of the s

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation

	990 (2	2008) ARIZONA TECHN	OLOGY CO	UNCIL		86-0684	848 Page 9
	rt VIII	Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Fundraising events 1c Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f	45,372.				
듯崩		Noncash contributions included in lines 1a-1f; \$		345,372.			
		PROGRAM SERVICES	Business Code 900099				
Program Service Revenue	ь						
E S	C						
흔칅	q						
5	е						5 C
٥	f	All other program service revenue					1.3
	. 9	Total, Add lines 2a 2f	🕨	583,756.		,	, , ,
	3	Investment income (including dividends, interest other similar amounts)	>	397.			3974
Ì	5	Royalties					
	6 a	Gross Rents 9,600. Less: rental expenses	(ii) Personal				
	С			0 600			0.600
	d	Net rental income or (loss)	<u></u>	9,600.			9,600.
	7 a	Gross amount from sales of (i) Securities	(ii) Other	4		İ	
		assets other than inventory					
	b	Less: cost or other basis					
		and sales expenses	ļ		į		آهان و ا
	С	Gain or (loss)		1		1	
	đ	Net gain or (loss)	. <u></u>				37.7
Other Revenue		Gross income from fundraising events (not including \$ of contributions reported on line 1c) See					
ള		Part IV, line 18 a Less: direct expenses b	J	1			,
٥Į		Net income or (loss) from fundraising events		1	ļ		وسيطيعه والمراجع
	-	Gross income from gaming activities. See	····	 	 	 	(A)
1	y a	<u> </u>			1		The state of the s
1	_	Part IV, line 19 a		1	1		1
	_	Less: direct expenses b	<u> </u>	1	1		, distribution
	_	Net income or (loss) from gaming activities	<u></u>	 	-	 	 "
	10 a	Gross sales of inventory, less returns	1		1	1	
		and allowances a		4	1	1	
	ь	Less: cost of goods sold b	<u></u>	1		1	a company and a second
	c	Net income or (loss) from sales of inventory	<u></u>			ļ	
		Miscellaneous Revenue	Business Code	₹	ļ	1	17.
	11 a	ADVERTISING	511120	142,593.		142,593.	
		MISC REVENUE	900099	9,626.		L	9,626.
		PAID SUBSCRIPTIONS	511120	705.		705.	
		All other revenue		1			1
	-	Total. Add lines 11a-11d	•	152,924.		1	1
		Total Revenue. And lines 1h, 2g, 3, 4, 5, 8d, 7d, 8c, 9c, 1		1092049		143,298.	19,623.
8320	12	TOTAL FICVEHOR. AND INTES 17, 20, 3, 4, 5, 60, 70, 80, 90, 1	us and the	1 1076047.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>, _ = - , u , u , u , u , u , u , u , u , u ,</u>	Evm 00U (3009)
8320 02-02	2-09			٥			Form 990 (2008)

Form 990 (2008) ARIZONA TECHN
Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

7b, 8b, 9b, and 10b of Part V		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance	to governments and				
organizations in the U.S. Se	e Part IV, line 21				
2 Grants and other assists	ance to individuals in				
the U.S. See Part IV, line	22				
3 Grants and other assista	ince to governments,			1	
organizations, and indivi	duals outside the US				
See Part IV, lines 15 and	116				
4 Benefits paid to or for m	embers				
5 Compensation of curren	T T				
trustees, and key emplo	yees	247,373.			
6 Compensation not included	above, to disqualified				
persons (as defined under s	section 4958(f)(1)) and	İ			
persons described in section				}	
7 Other salaries and wage		292,452.			
8 Pension plan contributions					
and section 403(b) employ	' ' '	5,274.		<u> </u>	
9 Other employee benefits	[12,711.			
10 Payroll taxes	í	35,618.			
11 Fees for services (non e	ľ				
a Management	· · ·				1
b Legal					
c Accounting		5,300.			-73
d Lobbying					
e Professional fundraising se					
f Investment managemen	r				
12 Advertising and promote					* 10-7-12.
13 Office expenses		27,644.			•
14 Information technology		2,069.			
15 Royalties					11 是是在
16 Occupancy		30,740.			7 5 6 7 5 5
17 Travel		30,367.			
18 Payments of travel or er		30,30,			77.44
for any federal, state, or					5 KW
19 Conferences, convention		208,865.		 	
		3,781.		 	
		3,701.	-		
	and amortization	11,842.		 - 	
	*	11,042.			
	nannon not covered				
above. (Expenses grouped	together and labeled	ļ		J j	
miscellaneous may not exc expenses shown on line 25		1			
DDOGDAMO	oueluw.)	129,121.			
b MAGAZINE EXP	PNCP	113,654.		·	
c MARKETING	- THOE	4,163.			. 47
. MOMBBOULD F	YDENCE	2,487.			. **
		601.			
e SPONSORSHIP	evenop	001.			
f All other expenses	Add have different for	1 164 062		 	
25 Total functional expenses		1,164,062.		 	4 7 4 PT
26 Joint Costs. Check here		ĺ			1
SOP 98-2. Complete this to	•				
reported in column (B) join					1. 经有效
educational campaign and	fundraising solicitation .			_L	4 . 2 3 . 42 . 5

		Dalance Shaet			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			115,309.	1	130,128
Ī	2				132,311.	2	49,744
l	3	Savings and temporary cash investments			200,011	3	12) / 111
	-	Pledges and grants receivable, net				4	
ŀ	4	Accounts receivable, net				-	
]	5			· · · · · · · · · · · · · · · · · · ·		اءا	
	_	employees, or other related parties. Complete P				5	
- 1	6	Receivables from other disqualified persons (as					
İ		4958(f)(1)) and persons described in section 495					
_	_	Part II of Schedule L				7	
£	7	Notes and loans receivable, net					
Assets	8	Inventories for sale or use				8	
_	9	Prepaid expenses and deferred charges				9	<u></u>
	10a		10a	70,374.		1 1	
	b	Less. accumulated depreciation. Complete			20 100		17 005
				52,569.	29,108.		17,805
	11	Investments - publicly traded securities				11	. ~; ~;
	12	Investments - other securities See Part IV, line				12	<u>-</u>
	13	Investments · program-related. See Part IV, line				13	2 * 43 <u></u>
	14	Intangible assets			7 454	14	0.476
	15				7,154.		2,476
	16	Total assets. Add lines 1 through 15 (must equ		1	283,882.		200,153
	17	Accounts payable and accrued expenses		·		17	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
50	21	Escrow account liability, Complete Part IV of Sc				21	<u> </u>
Liabilities	22	Payables to current and former officers, directo	rs, trus	stees, key employees,		1 1	
de i		highest compensated employees, and disqualit	ied pe	rsons. Complete Part II		1 1	, -
_		of Schedule L				22	
	23	Secured mortgages and notes payable to unrel	ated th	nird parties	12,309.	23	8,248
	24	• •				24	
	25	Other liabilities Complete Part X of Schedule D			16,526.		8,871
	26	Total liabilities, Add lines 17 through 25		···	<u> 28,835.</u>	26	17,119
		Organizations that follow SFAS 117, check h	ere 🕨	and complete		1 1	مري الأمولية در المدار براي
8		lines 27 through 29, and lines 33 and 34.					
Balances	27					27	
3aF	28	Temporanly restricted net assets				28	
	29	Permanently restricted net assets				29	
Fund		Organizations that do not follow SFAS 117, o	heck l	here 🕨 🗶 and		1 1	
ō	ļ	complete lines 30 through 34.				, i	. Arr
Net Assets	30	Capital stock or trust principal, or current funds	, ,		0.	30	
884	31	Paid-in or capital surplus, or land, building, or e	quipme	ent fund	0.	31	of the sale
et /	32	Retained earnings, endowment, accumulated in	ncome	, or other funds	255,047.	32	183,034
Z	33	Total net assets or fund balances			255,047.	33	183,034
	34_	Total liabilities and net assets/fund balances			283,882.	34	200,153
Pa	rt XI	Financial Statements and Reporting	9				- 1
					_		Yes No
1	Acc	ounting method used to prepare the Form 990.	\mathbf{X}	Cash 🔲 Accrual 🗀	Other		1 1
2a		e the organization's financial statements compile			accountant?		2a X
ь		e the organization's financial statements audited					
		es" to lines 2a or 2b, does the organization have					
_		ew, or compilation of its financial statements and					
За		result of a federal award, was the organization re					
ь		es," did the organization undergo the required at					3b
	1 12-1						Form 990 (2004 (1913)
		-		11			700 AVE

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2008 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

➤ To be completed by organizations described below.

Attach to Form 990 or Form 990-EZ.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part FB.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

	11(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Name of organ				Emplo	oyer identification number
	ARIZONA	<u>TECHNOLOGY COUN</u> y all organizations exem	CIL	FO1(a) and section 52	86-0684848
Part I-A			pt under section	1 50 f(c) and section 52	ir organizations.
	See the instructions for S			- D- + 8/	
		zation's direct and indirect politic			
3 Voluntee	rhours				
Part I-B		y all organizations exem	pt under section	501(c)(3).	
	See the instructions for S				
		incurred by the organization und			
		incurred by organization manage			
_		on 4955 tax, did it file Form 4720			
					Yes 🐃 🗀 No
Part I-C	describe in Part IV. To be completed by	y all organizations exem	nt under section	501(c) except section	n 501(c)(3).
rait i-o	•	Schedule C for details.	•		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1 Enter the		d by the filing organization for se		ction activities	
		nization's funds contributed to ot			
					No. of the state of
3 Total of o	direct and indirect exempt	function expenditures Add lines	1 and 2 and enter he	ere and on	The second secon
Form 112	20-POL, line 17b			<i></i>	tor , i
4 Did the fi	ling organization file Form	1120-POL for this year?			Yes No
5 State the	names, addresses and e	mployer identification number (El	N) of all section 527 p	political organizations to whic	h payments were made
Enter the	amount paid and indicate	e if the amount was paid from the	filing organization's	funds or were political contrib	outions received and $\sim 85\%$
		a separate political organization,	such as a separate se	egregated fund or a political a	action committee (PAC).
If additio	nal space is needed, prov	ide information in Part IV.			,
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
				4.	I H none enter O.
					If none, enter -0
					If none, enter -O
					If none, enter -O.
					If none, enter -O.
					If none, enter -O.
					If none, enter -O.

Schedule C (Form 990 or 990-EZ) 2008	ARIZ	ONA TE	CHNOLOGY CO	UNCIL	86-6	0684848 Page 2	
Part II-A To be completed by	organi	izations e	xempt under sed	ction 501(c)(3) that	filed Form 576	8	
(election under secti				nedule C for details.			
A Check > if the filing organization							
B Check I if the filing organization	on check	ed box A ar	nd "limited control" pro	ovisions apply.		,	
		bying Exper leans amou	nditures nts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals	
1a Total lobbying expenditures to influe	nce pub	olic opinion (grassroots lobbying)				
b Total lobbying expenditures to influe	-		=				
c Total lobbying expenditures (add line							
d Other exempt purpose expenditures							
e Total exempt purpose expenditures							
f Lobbying nontaxable amount Enter	the amo	ount from the	following table in bot	th columns.	 	<u> </u>	
If the amount on line 1e, column (a) or	(b) is;	The lob	bying nontaxable am	ount is:		İ	
Not over \$500,000		20% of	the amount on line 1e	·			
Over \$500,000 but not over \$1,000,	000	\$100,00	O plus 15% of the exe	cess over \$500,000.			
Over \$1,000,000 but not over \$1,50	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000						
Over \$1,500,000 but not over \$17,0	00,000		O plus 5% of the exce	ess over \$1,500,000			
Over \$17,000,000		\$1,000,	000			S. Carre	
q Grassroots nontaxable amount (ente	er 25% o	of line 1f)				1.0	
h Subtract line 1g from line 1a Enter-		-		Г			
Subtract line 1f from line 1c. Enter -0		-				1 1	
j If there is an amount other than zero							
reporting section 4911 tax for this ye		·		<u> </u>		Yes No	
			eraging Period Under			· Lander the collection	
				n do not have to comp a through 2f of the inst			
	Lob	bying Expe	nditures During 4-Ye	ar Averaging Period			
Calendar year (or fiscal year beginning in)	(a)	2005	(b) 2006	(c) 2007	(d) 2008	(e) Total	
2a Lobbying non-taxable amount							
b Lobbying ceiling amount							
(150% of line 2a, column(e))							
]			
c Total lobbying expenditures			<u> </u>				
						7.9	
d Grassroots non-taxable amount							
e Grassroots ceiling amount (150% of line 2d, column (e))			Ì			7. 7. 7. 7. 7.	
(15070 Of and Ed) Goldmin (G))				 	 		
f Grassroots lobbying expenditures						- ,	
	-		<u> </u>	·	Schedule C (Form	990 or 990-EZ) 2008	

832042 12-18-08

Schedule C (Form 990 or 990-EZ) 2008 ARIZONA TECHNOLOGY COUNCIL 86-0684848 Page 3
Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

c If 'Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details. Yes No Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C instructions for details. Dues, assessments and similar amounts from members Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Cotal Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)			(a	<u>, </u>	(b)
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, (legislators, or the public? e Publications, or published or broadcast statements? d Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, tectures, or any other means? i Other activities? II "Yes," describes in Part IV.] Total lines to through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 at lite filing organization incurred a section 4912 at lite filing organization incurred as section 4912 at lite filing organization incurred as section 4912 at lite filing organization incurred as section 4912 at lite filing organization incurred as section 4912 at lite filing organization incurred as section 4912 at lite filing organization incurred as section 4912 at lite filing organization incurred as section 4912 at lite filing organization incurred as section 4912 at lite filing organization incurred as section 4912 at lite filing organization incurred as section 4912 at lite filing organization sexempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details. 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in house lobbying expenditures from the prior year? 3 X 2Dud the organization agree to carryover tobbying and political expenditures from the prior year? 2 Section 162(e) onn-deductible lobbying and political expenditures from the prior year? 2			Yes	No	Amount
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Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. OMB No. 1545-0047 Open to Public

Inspection Employer identification number Name of the organization ARIZONA TECHNOLOGY COUNCIL 86-0684848 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for chantable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Preservation of certified historic structure Protection of natural habitat Preservation of open space 2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements **2**a Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Yes Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ _ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and \$180, include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV. the text of the footnote to its financial statements that describes these items. . m. 153m 1 b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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Schedule D (Form 990) 2008

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

		TECHNOLOG				<u> 584848</u>	
Pai	t III Organizations Maintaining C						
 3	Using the organization's accession and othe						
	that apply):	_					
а	Public exhibition	d	Loan or ex	change programs			
ь	Scholarly research	е	Other				
С	Preservation for future generations						
4	Provide a description of the organization's co	offections and explain	n how they further	the organization's	exempt purpose in Pa	art XIV.	
5	During the year, did the organization solicit of						
	to be sold to raise funds rather than to be ma					Yes	
Par	t IV Trust, Escrow and Custodial					art IV, line 9	, or
	reported an amount on Form 990, Pa	rt X, line 21.		_			
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribute	ons or other assets	not included	_	
	on Form 990, Part X?					☐ Yes	
ь	If "Yes," explain the arrangement in Part XIV						
	•	•	_			Amount	
c	Beginning balance				1c		
ď	Additions during the year						
e	Distributions during the year						
f	Ending balance						
2a	Did the organization include an amount on F					Yes	
	If "Yes," explain the arrangement in Part XIV						
_	t V Endowment Funds. Complete		red "Yes" to Form	990, Part IV, line	10.		
		(a) Current year	(b) Pnor year		ck (d) Three years bac	k (e) Four	years b
1a	Beginning of year balance						
ь	Contributions						
c	Investment earnings or losses					T	
d	Grants or scholarships					1	
e	Other expenditures for facilities						. ,
_	and programs				j		
f	Administrative expenses						
g	End of year balance					, .	10 34.15
2	Provide the estimated percentage of the year	r end balance held a	is:				
a	Board designated or quasi-endowment		%				ع,
ь	Permanent endowment	_%	_				
c		<u>~</u> %				*.	
За	Are there endowment funds not in the posse	ession of the organiz	ation that are held	and administered	for the organization	1 f y 22	,,,,,,
	by.						Yes
	(i) unrelated organizations					. 3a(i)	
	(ii) related exposurations					3a(ii)	
ь	If "Yes" to 3a(ii), are the related organization					. <u>3b</u>	
4	Describe in Part XIV the intended uses of the	e organization's ende	owment funds.				
Pa	rt VI Investments - Land, Buildin	gs, and Equipm	ent. See Form 99	30, Part X, line 10.			
	6	(a) Cost or o	ther (b) Co	st or other	(c) Depreciation	(d) Bool	k value
	Description of investment	h:- (nent) basi	is (other)			_
	Description of investment	basis (investi			 		
							
1a	Land						
1a b	Land						
1a b	Land			70,374.	52,569.	1	7,80
1a b c	Land			70,374.	52,569.	1,	7,80

Schedule D (Form 990) 2008 ARIZONA TEC Part VII Investments - Other Securities. Se	CHNOLOGY COUNCIL	· · · · · · · · · · · · · · · · · · ·	86-0684848 Page 3
(a) Description of security or category (including name of security)	(b) Book value	, ,	od of valuation; f-year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
			
	 		
	 		
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)	 		
Part VIII Investments - Program Related. s	ee Form 990. Part X. line 13.		
(a) Description of investment type	(b) Book value	(c) Metho	od of valuation:
(a) Description of investment type	(U) SOON VAIGE	Cost or end-o	f-year market value
			
	 		75 140
	 		
	1		
		······································	45 - 545
Total. (Col (b) should equal Form 990, Part X, col (B) line 13)			- 1
Part IX Other Assets. See Form 990, Part X, line			المواقع والمرابوات والما
(a)	Description		(b) Book value
			
			
		 	
			
		.,,	
Total. (Column (b) should equal Form 990, Part X, col (B) I		<u></u>	<u></u>
Part X Other Liabilities. See Form 990, Part X, (a) Description of liability) Amount	· · · · · · · · · · · · · · · · · · ·
		, , renount	N - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Federal income taxes SIMPLE IRA DEDUCTIONS PAYABLE	,	3,343.	
OTHER	•	790.	
CREDIT CARDS PAYABLE		2,177.	
DUE TO AZTC FOUNDATION		2,561.	· · · · · · · · · · · · · · · · · · ·
			e gradusta
			Garage Carting
<u> </u>			
Total. (Column (b) should equal Form 990, Part X, col (B) (8,871.	Part of the second of the seco
In Part XIV, provide the text of the footnote to the organization CIN 48	ation's financial statements th	at reports the organization's	s liability for uncertain tax positions
under FIN 48. 12-23-08			Scharbula D (Farry 2003 2003
12·23-08	17		Schedule D (Form 990) 2008 (9 5 8 7 8
	1,		<i>t.</i> '

	dule D (Form 990) 2008 ARIZONA TECHNOLOGY COUNCIL	-		86-0684848	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to I	-inanciai S	tatements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)				
2	Total expenses (Form 990, Part IX, column (A), line 25)	.,	2		
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities			•	
6	Investment expenses		1 1 -		
7	Prior period adjustments				
8	Other (Describe in Part XIV)) .		
9	Total adjustments (net). Add lines 4-8		1 1		
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		·		
	t XII Reconciliation of Revenue per Audited Financial Statemer	ts With Re		Return	
1	Total revenue, gains, and other support per audited financial statements			1 7	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		···· ··· ··· ··· ··· ··· ···		
a		2a		i i	
_	Net unrealized gains on investments			7	
b		1 _ 1		-	
c	Recoveries of pnor year grants	1 1	<u>-</u>	┥ ┃	
đ	Other (Describe in Part XIV)			╡ <u>╻</u> ╽	
е	Add lines 2a through 2d			1 - 1	* 1 - 74
3	Subtract line 2e from line 1	··· · ···· ···	··········· ••• ••• •••	3	7 17
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		1 1 '	*
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-	٠
b	Other (Describe in Part XIV)	46		_	
С	Add lines 4a and 4b				
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)				
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	nts With E	xpenses pe	r Keturn	
1	Total expenses and losses per audited financial statements			1_1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				ر بر بر ب
а	Donated services and use of facilities	2a		_	ر پرمانسوسیدان د د
b	Prior year adjustments	2b		_	* ** ** ** ** ** ** ** ** ** ** ** ** *
C	Losses reported on Form 990, Part IX, line 25	2c		_	
d		2d		_	•
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	.,		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				1.8 1 1. 1.
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			and Berlinan "
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			. 4c	, ,
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.) .	<u> </u>	<u></u>	. 5	_11,
Pa	rt XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III	, lines 1a and	4; Part IV, lines	1b and 2b; Part V, line	4; Part
X; Pa	irt XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b				
					<u> </u>
_				•	,
					~. \$ § ,
					~
				Schedule D (Form 9	200/ 2009

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23. OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

ARIZONA TECHNOLOGY COUNCIL

Employer identification number 86-0684848

Pa	R I Questions Regarding Compensation		_	
			Yes	No_
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,	Į,		1
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			ĺ
	Travel for companions Payments for business use of personal residence		1	1
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	1		i
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
þ	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision			
	of all of the expenses described above? If "No," complete Part III to explain	1b_		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	L	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's	ŀ		
	CEO/Executive Director. Check all that apply			
	Compensation committee Written employment contract	ĺ		12
	Independent compensation consultant Compensation survey or study	ł	1	1
	Form 990 of other organizations Approval by the board or compensation committee	}	ĺ	
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
a	Receive a severance payment or change of control payment?	4a .	فغوماء	145 X 7
ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	_	, (X
_	Participate in, or receive payment from, an equity-based compensation arrangement?			X
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			2. 1.
	Tes to any or miles at 0, his tire persons and provide the approach amount of the miles at the miles at the persons and provide the approach amount of the miles at the miles			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.		Ì	
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			ĺ
	contingent on the revenues of:		1	
а	The organization?	<u>5a</u>	<u> </u>	<u> </u>
b	Any related organization?	<u> 5b</u>	<u> </u>	ـــــ
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			1
	contingent on the net earnings of	-		
а	The organization?	6a	<u> </u>	<u> </u>
	Any related organization?	1		
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	1		
	not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	unitial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	в		
LHA		ıle J (Forr	n 990	2008

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86-0684848

ARIZONA TECHNOLOGY COUNCIL

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed. Schedule J (Form 990) 2008

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i) (ii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

	ſ							
		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C)	(D)	(E) Total of columns	(F) Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(C)-(I)(B)	reported in prior Form 990 or Form 990-EZ
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SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

2008 Open to Public

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Open to Public Inspection

Name of the Organization

ARIZONA TECHNOLOGY COUNCIL

Employer Identification number 86-0684848

Part I Continuation of Officers, D	IECHNOLO	<u>ز جار</u>	200	c K	IN	<u>- 11</u>		nyges and Highes	t Compensated I	
	1	usi	ee			CII	ipii			
(A)	(B)	ĺ		(0				(D)	(E)	(F)
Name and Title	Average	٠.,		Posit call t			LA	Reportable compensation	Reportable compensation	Estimated amount of
	hours	L (C	neci	t an t	nat	app	iiy)	from	from related	other
	per week					g		the	organizations	compensation
	Week	ē	1	1 1		ğ		organization	(W-2/1099-MISC)	from the
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		2	턡	ΙI		ğ				and related
		ğ	5	1 1	oyee	Ē	ł			organizations
		ndinkual trustee or director	insututional trustes	Officer	Q E	Highest compensated employee	Former	ļ		
		Ē	量	를	Key	물	Ē			
KEITH OTIS							Ī			u.
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MICHELLE PIERSON			Γ							
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STEVE REINHART	1.00	**					\vdash			- A.
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KATHY SACKS	1.00	1	†		H	\vdash	1			-
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LESLIE TOLBERT	1 00	١.,	İ	1	1	1	1	0.	0.	0.
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SANDRA WATSON	1 00	١.,	1	1				^		0
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JUDITH WEISS	1	1		ĺ	ĺ	ĺ	1			1
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QUINN WILLIAMS					1		1			1
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STEVEN ZYLSTRA	1									
PRESIDENT & CEO	40.00	↓_	1	X	 	1_	4	213,231.	0.	3,898.
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2008

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Public Inspection

Name of the organization ARIZONA TECHNOLOGY COUNCIL	Employer identification number 86-0684848
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZ	ATION HAS DUES PAYING
MEMBERS.	
FORM 990, PART VI, SECTION A, LINE 10: FORM 990 W	
PRESIDENT/CEO, BOARD TREASURER AND DIRECTOR OF FI	NANCE BEFORE IT IS FILED.
FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS,	DIRECTORS OR TRUSTEES,
AND KEY EMPLOYEES ARE REQUIRED ANNUALLY TO DISCLO	SE ANY CONFLICTS OR ADVISE
THERE ARE NONE.	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANI	ZATION MAKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,	AND FINANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST.	
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