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Form **990**

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)

OMB No 1545-0047

2010

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

Form 990 (2010)

TEEA0101 03/25/11

| | Α | For the 2 | 010 calend | dar year, or tax | year begi | nning Sep | 1 | , 20 | 10, and | l endir | ng Aug | 31 | , | 2011 | | |
|-----------------|---|---|------------------------------------|--|--------------------------------------|---|-----------------------------------|------------------------------------|----------------------|----------|----------------|-----------------|-------------------------|----------------|------------|------------------|
| | В | Check if app | olicable | C Name of orga | nization Th | e Austin | Film S | Society | | | | D Employ | er Identif | ication Nu | mber | |
| | | Addres | s change | Doing Busines | ss As | | | _ | | | | 74- | 24338 | 323 | | |
| | | Name | change | Number and s | treet (or P O | box if mail is not | delivered to str | eet addr) | | Room | /suite | E Teleph | | | | |
| | | Initial r | • | 1901 East | t 51st | Street | | | | | | (51 | 2) 32 | 22-014 | 4 5 | |
| | | Termin | | City, town or | | | - | Sta | ate ZIP | code + | 4 | ,,,, | | | | |
| | | \vdash | led return | Austin | • | | | т | Y 78 | 723 | | G Gross | aceunts \$ | 1 867 | 546 | |
| | | Ħ | ation pending | | dress of princip | nal officer | | | <u> </u> | 723 | H(a) Is this a | | | | Yes | X No |
| | | ~pplice | ation pending | | | | ar Amari | ~ | TX 78 | 772 | H(b) Are all | - | | | Yes | No. |
| | _ | Tay ayan | npt status | X 501(c)(3) | 501(c) (| | insert no) | 4947(a)(1) | | 527 | If 'No,' | attach a list | (see inst | ructions) | | ٠٠٠ ل |
| | ╁ | Website: ► www.austinfilm.org H(c) Group exemptio | | | | | | | | | | | | | | |
| | <u>, , , , , , , , , , , , , , , , , , , </u> | | | | | | | | | | • | 1 | | | | |
| | K Pa | | organization | | Trust | Association | Other > | | L Year o | of Forma | tion 1986 | o IMIS | State of le | gal domicil | e TX | |
| | ra | | Summar | | | | | | <u> </u> | <u> </u> | | | | | | |
| | | 1 Bri | eny descri | be the organiza | ation's miss | sion or most s | significant a | ictivities . | See 3 | Stat | ement . | <u> </u> | | | | . – – - · |
| | e i | | | | | | | | | | | | | | | |
| | Governance | | | | | | | | | | | | | | | |
| | Ver | 2 Ch | | ox ► if the | | | | | | | | | | | | |
| | ဗိ | | | oting members | | | | | poseu (| oi illoi | e man 25 | /0 OI ILS III | e asse | .5 | | 22 |
| | ∞ | | | | | | | | e 1b) | | | | 4 | | | 22 |
| 2012 | ctivities & | 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) | | | | | | | | | | | 5 | | | 16 |
| 20 | Ϋ́ | 6 Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12 | | | | | | | | | | | 6 | | | 90 |
| F== | ĕ | | | | | | | | | | | | 7 a | | | 0. |
| | | b Ne | t unrelated | l business taxa | ble income | from Form 9 | 90-T, line 3 | 34 | | | | | 7b | | | |
| | | | | | | | | | | | Р | rior Year | | Curi | rent Ye | ar |
| AUG | | 8 Co | ntributions | and grants (P | art VIII, line | e 1h) | | | | | 1 | ,245,6 | 36. | 1, | 432, | 350. |
| - | Revenue | 9 Pro | gram serv | rice revenue (F | art VIII, lin | e 2g) | | | | | | 474,0 | 33. | | 431, | 626. |
| | ķ | 10 Inv | estment in | come (Part VII | ll, column (| (A), lines 3, 4 | , and 7d) | | | | | 8,0 | 07. | | 3, | 570. |
| 씢 | ď | 11 Oth | ner revenu | e (Part VIII, co | lumn (A), I | ines 5, 6d, 8d | , 9c, 10c, a | nd 11e) | | | | | | | | |
| SCANNED | | 12 Tot | al revenue | e – add lines 8 | through 11 | (must equal | Part VIII, c | olumn (A), | line 12) |) | 1 | ,727,6 | 76. | 1, | 867, | 546. |
| Ķ | | | | ımılar amounts | | | | 3) | | | | 281,6 | 77. | | 377, | 012. |
| 9 | | 14 Be | nefits paid | to or for mem | bers (Part I | X, column (A |), line 4) | | | | <u> </u> | | | | | |
| | | 1 5 Sa | laries, othe | er compensatio | n, employe | ee benefits (P | art IX, colu | mn (A), line | s 5-10) | 1 | <u> </u> | 596,080. | | | 607, | 405. |
| | Expenses | 16a Pro | ofessional | fundraising fee | fees (Part IX, column (A), line 11e) | | | | | | | | | | 24, | 600. |
| | pen | | | ndraising expenses (Part IX, column (D), line 25) ► 225,308. | | | | | | | | | | | | |
| | EX | | | | | | | | | | | 992 (| 0.5 | 1 | 191 | 997. |
| | | 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f.24D 992, 18 Total expenses. Add lines 13-17 (must equal Part IX, delim (A), lines 11,869, | | | | | | | | | | ,869,7 | | | | 014. |
| | | | | | | u | | 10 1 10 1 E 2 D J | -\. | | | | | | | |
| | b 8 | 13 Ne | veriue less | expenses Su | biract line | TO HOIL BLIEN | | | <u> </u> | | | -142,0 | | | | 468. |
| | este o elence | 20 Tot | tal accote | (Part X, line 16 | :\ | 108 | JUL 2 | 2 4 2012 | | | | g of Currer | | | of Ye | |
| | Asse Bale | | | es (Part X, line | • | ₹ | | | RS-(| | | ,645,7 571,7 | | ۷, | | 749. |
| | det / | | | | - | 5 | OCD | | | | | | | | | |
| | <u> </u> | | | fund balances | Subtract | line 21 from 1 | ine 2051 | CIV, UI | لحد | | 2 | ,074,0 | 122. | Ι, | 770, | 624. |
| | | | | re Block | | | | | | | | | | | | |
| | Unde | r penalties dete Declar | of perjury, I de ation of prepa | eclare that I have e aver (other than office | vamined this received in | eturn, including ac in all information (| ccompanying so of which prepar | chedules and si rer has any kno | tatements, wledge | , and to | the best of m | y knowledge | and belie | f, it is true, | , correct, | and |
| | | | |) (| | | | | - | | | 1/1/12 | 7/ | | | |
| | c: | | Signatu | ure of officer | $\overline{}$ | | | | | | Dai | 11 [6] 12 | | | | |
| | Sig He | ļN ro | . • | • | | | | | | | | | - | | | |
| | 116 | 16 | | ecca Camp | | | , | | | | · | - | | | | |
| | | | ļ | preparer's name | | Preparer's sig | natura 1 | | Date | <u> </u> | 1 | | 7 . TE | PTIN | | |
| | _ | | 1 . , | • | | | ا ماید | il rol | | الما | 2012 | Check _ | 」" | DVV. | 7417 | ורו |
| | Pai | | | ela Hill, CPA TAMUA HILL CFF US self employed self emp | | | | | | | ed | 100 | 177 | 76- | | |
| | | eparer e Only | Firm's nami | | | _ | | | | | | | 7. | 1 0 | 200 | 112 |
| | US | e Only | Firm's addr | | | Lamar Bo | ulevard | | | | | | Firm's EIN > 74-2902112 | | | |
| Austin TX 78704 | | | | | | | | | | | | Phone no | | | | |
| | May | the IRS | discuss th | is return with t | he prepare | r shown abov | e? (see inst | tructions) | | | | | | X Ye | s | No |

BAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0102 10/06/10

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Part IV Checklist of Required Schedules

| | | | res | 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 | × | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) | 2 | х | |
| 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 | | х |
| 4 | Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II | 4 | | х |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III | 5 | | |
| 6 | Did the organization maintain any donor advised funds or any similar funds or 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 | | х |
| 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_ | | х |
| 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 | | х |
| 10 | Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V | 10 | х | |
| 11 | If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable. | | | |
| • | a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI | 11 a | х | |
| ı | b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VII | 11 b | | х |
| (| c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII | 11 c | | <u>x</u> |
| | d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX | 11 d | | х |
| | e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X | 11 e | х | |
| | f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X | 11 f | | x |
| | a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII | 12a | х | |
| | b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional | 12b | | <u>x</u> |
| | Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E | 13 | | <u> </u> |
| | a Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | _ <u>x</u> _ |
| | b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Parts I and IV | 14b | | <u>x</u> |
| | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV | 15 | | <u>x</u> _ |
| | 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, Parts III and IV | 16 | | x |
| | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) | 17 | х | |
| | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II | 18 | х | |
| | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III | 19 | | <u>x</u> |
| | a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H | 20 | | <u>x</u> |
| t | o If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) | 20 b | | |

Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Х 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2º If 'Yes,' complete Schedule I, Parts I and III 22 X Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If 'Yes,' complete* Schedule J 23 Х 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25 24a X b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 240 d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a 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 25a X b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I 25b Х 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III 27 X A. 15% 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a X b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV 28b X c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? 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 X Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 х Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Х 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? 35 X a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 X No Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 X Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI 37 Х

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Form 990 (2010)

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Note. All Form 990 filers are required to complete Schedule O

| Check if Schedule O contains a response to any question in this Part V | | | | | | | | | |
|---|--|--------------|--|--|--|--|--|--|--|
| Check it Schedule O contains a response to any question in this Part V | · · · · · · · · · · · · · · · · · · · | Yes | No | | | | | | |
| 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable | ., | res | NO | | | | | | |
| 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b | 81 | | | | | | | | |
| | | | | | | | | | |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and report (gambling) winnings to prize winners? | table gaming | c x | | | | | | | |
| | '' | - | | | | | | | |
| 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a | 16 | | | | | | | | |
| b If at least one is reported on line 2a, did the organization file all required federal employment tax returns | | ЬХ | | | | | | | |
| Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | 1 | | | | | | | |
| 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3 | _ | x | | | | | | |
| b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule O</i> | 3 | | 1 | | | | | | |
| 4a At any time during the calendar year, did the organization have an interest in, or a signature or other aut | | | | | | | | | |
| financial account in a foreign country (such as a bank account, securities account, or other financial account)? | | | | | | | | | |
| b If 'Yes,' enter the name of the foreign country | | | | | | | | | |
| See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. | | | | | | | | | |
| 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5 | a | X | | | | | | |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction | on? 51 | ь | x | | | | | | |
| c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? | 50 | С | | | | | | | |
| 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the o | raanization | | | | | | | | |
| solicit any contributions that were not tax deductible? | 6 | a | x | | | | | | |
| b If 'Yes,' did the organization include with every solicitation an express statement that such contributions of | or gifts were | | - | | | | | | |
| not tax deductible? | 61 | ь | ļ | | | | | | |
| 7 Organizations that may receive deductible contributions under section 170(c). | | ŀ | | | | | | | |
| a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goo | ds and | | | | | | | | |
| services provided to the payor? | 7: | + | <u> </u> | | | | | | |
| b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? | | | | | | | | | |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | | | | | | | | | |
| d If 'Yes,' indicate the number of Forms 8282 filed during the year | 7.0 | + | X | | | | | | |
| e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contribution. | ract? 7 | - | X | | | | | | |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract | | _ | X | | | | | | |
| g If the organization received a contribution of qualified intellectual property, did the organization file Form | | + | ┼^ | | | | | | |
| as required? | 70 | a | x | | | | | | |
| h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization | n file a | | | | | | | | |
| Form 1098-C? | 71 | 1 | X | | | | | | |
| 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations | ions. Did the | | . | | | | | | |
| supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess holdings at any time during the year? | business 8 | | x | | | | | | |
| 9 Sponsoring organizations maintaining donor advised funds. | <u> </u> | + | | | | | | | |
| a Did the organization make any taxable distributions under section 4966? | 98 | | x | | | | | | |
| b Did the organization make a distribution to a donor, donor advisor, or related person? | 91 | | x | | | | | | |
| 10 Section 501(c)(7) organizations. Enter: | | 1 | † - | | | | | | |
| a Initiation fees and capital contributions included on Part VIII, line 12 | | | i | | | | | | |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | | | | | | | |
| 11 Section 501(c)(12) organizations. Enter: | | | | | | | | | |
| a Gross income from members or shareholders | | | | | | | | | |
| b Gross income from other sources (Do not net amounts due or paid to other sources | | | | | | | | | |
| against amounts due or received from them) | | | | | | | | | |
| 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041 | 7 128 | 1 | <u> </u> | | | | | | |
| b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b | | | | | | | | | |
| 13 Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | | | | | |
| a is the organization licensed to issue qualified health plans in more than one state? | 13 a | 1 | | | | | | | |
| Note. See the instructions for additional information the organization must report on Schedule O | | | İ | | | | | | |
| b Enter the amount of reserves the organization is required to maintain by the states in | | | | | | | | | |
| which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand | | - | | | | | | | |
| 14a Did the organization receive any payments for indoor tanning services during the tax year? | 14. |] | \ | | | | | | |
| b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O | 142 | | X | | | | | | |
| 2.1. 700, mad it med a form 720 to report mede payments. In 140, provide an explanation in Schedule O | 141 | <u>'</u> | 1 | | | | | | |

| Part | VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b bei | <u> </u> | | age (| | | | | | |
|---|--|-----------|--------|-------|--|--|--|--|--|--|
| Tare | a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chan Schedule O. See instructions. | | | | | | | | | |
| <u>`</u> | Check if Schedule O contains a response to any question in this Part VI | • | | X | | | | | | |
| Sect | ion A. Governing Body and Management | | | | | | | | | |
| | | | Yes | No | | | | | | |
| | Enter the number of voting members of the governing body at the end of the tax year 1a 22 | | | | | | | | | |
| | Enter the number of voting members included in line 1a, above, who are independent 22 | | | | | | | | | |
| 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 | | х | | | | | | |
| | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? | 3 | | х | | | | | | |
| | Did the organization make any significant changes to its governing documents | 4 | | x | | | | | | |
| | since the prior Form 990 was filed? | | İ | | | | | | | |
| | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X | | | | | | |
| 6 | Does the organization have members or stockholders? | 6 | | X | | | | | | |
| 7 a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? | | | | | | | | | | |
| b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | | | | | | | | | | |
| 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | | | | | | | | |
| a The governing body? | | | | | | | | | | |
| b (| Each committee with authority to act on behalf of the governing body? . | 8b | х | | | | | | | |
| 9 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 | | | | | | | | | | |
| Sect | ion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | | | | | | | | | |
| | | | Yes | No | | | | | | |
| 10 a Does the organization have local chapters, branches, or affiliates? | | | | | | | | | | |
| b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? | | | | | | | | | | |
| 11 a l | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? | 11 a | | Х | | | | | | |
| b l | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | | | | | | | | |
| 12 a l | Does the organization have a written conflict of interest policy? If 'No,' go to line 13 | 12 a | х | | | | | | | |
| b, | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | х | | | | | | | |
| c l | Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done | 12c | х | | | | | | | |
| 13 | Does the organization have a written whistleblower policy? | 13 | х | | | | | | | |
| 14 | Does the organization have a written document retention and destruction policy? | 14 | Х | | | | | | | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | | | | | | | |
| a · | The organization's CEO, Executive Director, or top management official | 15 a | x | | | | | | | |
| b (| Other officers of key employees of the organization | 15 b | X | | | | | | | |
| 1 | If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) | | | | | | | | | |
| 16 a (| Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16 a | | x | | | | | | |
| | If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the | 1 | | | | | | | | |
| | organization's exempt status with respect to such arrangements? | 16b | | | | | | | | |
| | | | | | | | | | | |
| 18 | List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available of the state of the s | lable | for pu | blic | | | | | | |
| ָ [| 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, statements available to the public | and | fınanc | ıal | | | | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organiz | ation | | | | | | | | |
| ▶_ | Rebecca Campbell 1901 B. 51st Street Austin, TX 78723 (51 | .2)_3 | 22-0 | 145 | | | | | | |
| | | | 000 / | | | | | | | |

| Form 990 (2010) The Austin Film Socie | Form 990 (2 | 2010) | The | Austin | Film | Societ |
|--|--------------------|-------|-----|--------|------|--------|
|--|--------------------|-------|-----|--------|------|--------|

74-2433823

Page 7

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- 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.

| Check this box if neither the organization | n nor any r | elate | dorg | anız | atio | n com | ipen | sated any current office | cer, director, or trustee | e |
|--|---|-----------------------------------|--------------------|---------|--------------|----------------------------------|--------|--|---|---|
| (A) | (B) | | | | | | • | (D) | (E) | (F) |
| Name and title | Average hours | Pos | ition (| check | all t | hat app | ly) | Reportable compensation from | Reportable compensation from | Estimated amount of other |
| | hours per week (describe hours for related organiza- tions in Schedule O) | adividi el trastee or director | mshihibasi tarstee | Officer | Key employee | Higt est compensated employee | Former | 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 |
| (1) Todd Allen | | | M | | | | | | | · · · · · · · · · · · · · · · · · · · |
| Director | 1.00 | х | | | | | | 0. | 0. | 0. |
| (2) Chris Adams | | | | | | | | | | |
| Director | 1.00 | х | | | | | | 0. | 0. | 0. |
| (3) Gloria Castro | | | | | | | | | | |
| Director | 1.00 | х | ll | | | | | 0. | 0. | 0. |
| (4) Kevin Dartt | | | П | | | | | | | |
| Director | 1.00 | х | | | | | | o. | 0. | 0. |
| (5) Matt Dentler | | | | | | | | | | |
| Director | 1.00 | x | | | | | | 0. | 0. | 0. |
| (6) Deborah Green | | | | | | | | | | |
| Director | 1.00 | х | | | | | | 0. | 0. | 0. |
| (7) Sarah Green | | | | | | | | | | , |
| Director | 1.00 | х | | | | | | 0. | 0. | 0. |
| (8) Karrie League | | | | | | | | | | |
| Director | 1.00 | х | | | | | i | 0. | 0. | 0. |
| (9) Jordan Levin | | | П | | | | | | | |
| Director | 1.00 | х | | | | | | 0. | 0. | 0. |
| (10) John McCall | | | | | | | | | | |
| Director | 1.00 | х | | | | | | 0. | 0. | 0. |
| (11) Brewster McCracken | | | П | | | | | | | |
| Director | 1.00 | х | | | | | | 0. | 0. | 0. |
| (12) Will Meredith | | | | | | | | | | |
| Director | 1.00 | х | | | | | | 0. | 0. | 0. |
| (13) Jane Schweppe | | | | | | | | | | |
| Director | 1.00 | х | | | | | | 0. | 0. | 0. |
| (14) Jeanette Scott | | | | | | | | | | <u> </u> |
| Director | 1.00 | х | | | | | | o. | 0. | 0. |
| (15) Beth Sepko | | | | | | | | | | |
| Director | 1.00 | х | | | | | | o. | 0. | 0. |
| (16) Alexa Wesner | | | | | | | | | | |
| Director | 1.00 | х | | | | | | 0. | 0. | 0. |
| (17) A. Travis White | | | | | | | | | | ··· |
| Director | 3.00 | х | | | | | | 0. | 0. | 0. |
| BAA | | | TEEA | 0107 | 12/ | /21/10 | | | ······································ | Form 990 (2010) |

| Form 990 (2010) The Austin Film Society | | | | | | | | | 74-243382 | |
|---|--|--------------------------------|-----------------------|--|--------------------|------------------------------|--------------------|--|---|---|
| Part VII Section A. Officers, Directors, Trust | tees, k | (ey | Em | ıplo | ye | es, | and | d Highest Con | pensated Emp | loyees (cont) |
| (A) | (B) | | | ((| c) | | | (D) | (E) | (F) |
| Name and title | Average hours | | | check | | | | Reportable | Reportable | Estimated |
| • | per week (describe hours for related organ; zations in Sch O) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensa employee | Former | 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 |
| | | | (0 | | | ted | | | | |
| (18) Richard Linklater Artistic Director | 1.00 | x | | | | | | 0. | 0. | 0. |
| (19) George Sledge | 1.00 | - | | | ┢ | П | | | | |
| Secretary | 1.00 | | | x | | | | o. | 0. | 0. |
| (20) Rodney Gibbs | | | | | | | | | | |
| Treasurer | 1.00 | | | х | | | | 0. | 0. | 0. |
| (21) Jann Baskett | | | | | | | | | | |
| Vice President | 1.00 | <u> </u> | | X | <u> </u> | | | 0. | 0. | 0. |
| (22) Catherine Robb | | | | | ļ | | | | | _ |
| President | 6.00 | | <u> </u> | Х | <u> </u> | \vdash | | 0. | 0. | 0. |
| (23) Rebecca Campbell | ļ., ., | | | l <u></u> | | | | 54 000 | • | 7 070 |
| Executive Director | 40.00 | | \vdash | Х | \vdash | - | | 74,800. | 0. | 7,970. |
| _(24) | - | | | | | | | | | |
| (25) | | | | | | | | | | |
| (26) | | ļ · · · | | | | | | | | |
| (27) | | | | | | | | | | |
| (28) | | | | | | | | | | |
| (29) | | | | | | | | | | · · · · · · · · · · · · · · · · · · · |
| 1 b Sub-total | <u> </u> | 1 | · · · | | | 1 | > | 74,800. | 0. | 7,970. |
| c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) | 4 | | | | | | • | 74,800. | 0. | 7,970. |
| 2 Total number of individuals (including but not limited | to thos | e lis | ted | abov | ve) v | who | rece | | 00,000 in reportabl | |
| from the organization > 0 | | | | | | | | | | Yes No |
| 3 Did the organization list any former officer, director of | or truste | e, k | еу е | empl | oye | e, or | hıg | hest compensated | employee | |
| on line 1a ³ If 'Yes,' complete Schedule J for such inc. 4. For any individual listed on line 1a, is the sum of ren | | | nen | ıc atı | on s | and c | othe | r compensation fro | nm | 3 X |
| 4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th such individual | an \$150 | 0,000 |)? /i | f 'Ye | s' c | omp | lete | Schedule J for | | 4 X |
| 5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' co | ompens: omplete | ation <i>Sch</i> | froi edu | m ai ile J | ny u <i>tor</i> | inrela such | ated <i>per</i> | l organization or in rson | dıvıdual | 5 X |
| Section B. Independent Contractors | | | | | | | | | | |
| Complete this table for your five highest compensate compensation from the organization | ed indep | ende | ent d | cont | ract | ors t | that | received more tha | n \$100,000 of | |
| (A) Name and business addres | s | | | | | | | Description (| of services | (C) Compensation |
| | | | | | | | | | | |
| | | | | | | | | | - | |
| | | | | | | | | | | |
| | · · · · · · · · · · · · · · · · · · · | | _ | | | - | | *** | | |
| | | | | | | | | | | |
| 2 Total number of independent contractors (including to \$100,000 in compensation from the organization ► | but not l | limite | ed to | o tho | se | liste | d ab | ove) who received | more than | |

| Pai | t viii Statement of Revenue | | | | • |
|---|--|----------------------|--|---|---|
| • | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | Revenue excluded from tax under sections 512, 513, or 514 |
| 22 | 1a Federated campaigns 1a | | | | |
| NA S | b Membership dues 1b 81,293 | | | | |
| 200 | c Fundraising events 1c 75,117 | | | | |
| F A | d Related organizations 1 d | 7 | | | |
| S.G | e Government grants (contributions) 1e 239,924 | 7 | | | } |
| NO IS | f All other contributions, gifts, grants, and | | | | |
| | similar amounts not included above 1f 1,036,016 | . | | | |
| CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS | g Noncash contributions included in Ins 1a-1f: \$ | | | | |
| | h Total. Add lines 1a-1f | 1,432,350. | | | |
| UE | Business Code | | | | |
| KE | 2a Admissions 711110 | 66,118. | 66,118. | 0. | o. |
| PROGRAM SERVICE REVENUE | b Fees for services 711110 | 44,364. | 44,364. | 0. | 0. |
| 힣 | c Rental fees 711110 | 321,144. | 321,144. | 0. | 0. |
| SER | d | | | | |
| Ψ | e | | | | |
| , R | f All other program service revenue | | | | |
| M | g Total. Add lines 2a-2f | 431,626. | | | |
| | 3 Investment income (including dividends, interest and | | | | |
| | other similar amounts) | 3,570. | 0. | 0. | 3,570. |
| | 4 Income from investment of tax-exempt bond proceeds | > | | | |
| | 5 Royalties | > | | | |
| | (i) Real (ii) Personal | _ | | | |
| | 6a Gross Rents | _ | | | |
| | b Less rental expenses | _ | | | |
| | c Rental income or (loss) | | | | |
| | d Net rental income or (loss) | <u> </u> | | | |
| | 7a Gross amount from sales of (i) Securities (ii) Other | _ | | | |
| | assets other than inventory | _ | | | |
| | b Less cost or other basis | | | | |
| | and sales expenses | _ | | | |
| ł | c Gain or (loss) | | | | |
| | d Net gain or (loss) | <u> </u> | | | |
| NOE | 8a Gross income from fundraising events (not including \$ | | | | |
| E | of contributions reported on line 1c) | | | | |
| OTHER REVEN | See Part IV, line 18 | | | | |
| 뚩 | b Less direct expenses b | | | | |
| ۱ | c Net income or (loss) from fundraising events | > | | | |
| | 9a Gross income from gaming activities See Part IV, line 19 a | | | | |
| | | _ | | | |
| | b Less direct expenses b | | | | |
| | c Net income or (loss) from gaming activities | <u> </u> | | | |
| | 10a Gross sales of inventory, less returns | | | | |
| | and allowances a | | | | |
| | b Less cost of goods sold b | - | | | |
| | c Net income or (loss) from sales of inventory | <u> </u> | | | |
| | Miscellaneous Revenue Business Code | | - | | |
| | 11a | | | | |
| | b | - | | | |
| | C | | | | |
| | d All other revenue | - | | | |
| | e Total. Add lines Tra-Tru | | 407 707 | <u> </u> | |
| | 12 Total revenue. See instructions | 1,867,546. | 431,626. | 0. | 3,570. |

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). (D) Fundraising (B) (A) Do not include amounts reported on lines Program service Management and Total expenses expenses 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, 277,012 277,012. Grants and other assistance to individuals in the U.S. See Part IV, line 22 100,000 100,000 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 74,780. 47,418. 10,650. 16,712. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 443,654. 281,323. 63,182 99,149. Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 12,735 8,527 1,642. 2,566. Other employee benefits 34,914 23,378 4,502. 7,034. 10 Payroll taxes 41,322. 27,669. 5,328. 8,325. 11 Fees for services (non-employees): a Management 9,500 6,828. 764. 1,908. 875 70 **b** Legal 629. 176. c Accounting 10,700 7,690 860 2,150. **d** Lobbying e Professional fundraising services See Part IV, line 17 24,600. 24,600. f Investment management fees **g** Other 132,095 128,093 1,582. 2,420 12 Advertising and promotion 18,927. 13,101. 1,249. 4,577. 13 Office expenses 18,769. 103,939. 60,006. 25,164. Information technology 32,108 22,578. 2,310. 7,220. 15 Royalties 16 Occupancy 367,816 348,803. 7,310. 11,703. 17 Travel 48,574 44,927. 0. 3,647. Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 0. 20,660 20,660 0 21 Payments to affiliates Depreciation, depletion, and amortization 243,419 227,439. 6,236. 9,744. 23 Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) a Special event expenses 127,360. 123,886. 2,869. 605. b In-Kind goods 12,668. 11,239. 0. 1,429. 40,085 c Bad debt 1,200. 38,885 0. d Miscellaneous 13,271 9,853. 3,412. 6. f All other expenses 25 Total functional expenses Add lines 1 through 24f 2,191,014 1,792,259 173,447 225,308. Joint costs. Check here ► SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Part X Balance Sheet (A) Beginning of year End of year Cash - non-interest-bearing 257,212 1 173,072. 2 Savings and temporary cash investments 401,829 2 336,535. Pledges and grants receivable, net 32,213 3 56,373. 4 87,328. Accounts receivable, net 153,352. Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 7 Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 11,858 9 5,967. 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 2,304,753 10b **b** Less accumulated depreciation 748,799. 716,583 10 c 1,555,954. Investments - publicly traded securities 138,721. 11 161,496. 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 2,645,744 16 2,442,749. 17 Accounts payable and accrued expenses 47,238. 17 222,694. 18 Grants payable 18 19 Deferred revenue 61,509 19 32,684. 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule I 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 430,995 24 391,198. Other liabilities Complete Part X of Schedule D 31,980 25 25,549. 26 Total liabilities. Add lines 17 through 25 571,722 26 672,125. Ë Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. 27 Unrestricted net assets 1,873,483 27 1,554,645. 28 Temporarily restricted net assets 3,862 28 19,302. Permanently restricted net assets 196,677. 29 196,677. Q R Organizations that do not follow SFAS 117, check here and complete **FDZD** lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 2,074,022 33 1,770,624. 24 Total liabilities and net assets/fund balances 2,645,744 34 2,442,749.

BAA

Form **990** (2010)

| Form 990 (2010) The Austin Film Society | 74-2433823 | <u> </u> | Pá | age 12 | | | | |
|--|----------------|----------|-------|---------------|--|--|--|--|
| Part XI Reconciliation of Net Assets | | | | | | | | |
| Check if Schedule O contains a response to any question in this Part XI | | | | х | | | | |
| 1 Total revenue (must equal Part VIII, column (A), line 12) | 111 | 1.8 | 67,5 | 546 | | | | |
| 2 Total expenses (must equal Part IX, column (A), line 25) | 2 | | 91,0 | | | | | |
| 3 Revenue less expenses. Subtract line 2 from line 1 | 3 | | 68. | | | | | |
| 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 22. | | | | | |
| 5 Other changes in net assets or fund balances (explain in Schedule O) | 5 | | 20,0 | | | | | |
| 6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | | | | | | | | |
| Part XII Financial Statements and Reporting | | | | | | | | |
| Check if Schedule O contains a response to any question in this Part XII | | | | П | | | | |
| | | | Yes | No | | | | |
| 1 Accounting method used to prepare the Form 990 Cash X Accrual Other | | | | | | | | |
| If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O | | | | | | | | |
| 2a Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | ' | X | | | | |
| b Were the organization's financial statements audited by an independent accountant? | | 2b | х | | | | | |
| c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant? | of the audit, | 2 c | x | | | | | |
| If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O | | | i | | | | | |
| d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both | ssued on a | | | | | | | |
| X Separate basis Consolidated basis Both consolidated and separate basis | | | | | | | | |
| 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133? | the Single | 3 a | | х | | | | |
| b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits | required audit | 3 b | | | | | | |
| BAA | | Form | 990 (| 2010) | | | | |

Form **990** (2010)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Employer identification number

Schedule A (Form 990 or 990-EZ) 2010

| The | | | | lm So | | | | | | | | | | | | 43382 | | | | | |
|----------------|---|--------|----------------------------|-------------------------------|-------------------|-------------------|---------------------|----------------|---|----------|----------------------|---|--|------------------------------------|-----------------------|---|------------------------|--------------------|---------------|--|--|
| Parl | 1 | Re | ason f | or Pub | lic C | harity | Statu | 15 (| All organizatioi | ns r | nust (| comple | ete this | part.) |) See i | nstruc | tions. | | | | |
| The o | rga | nızatı | on is no | ot a priva | te fou | ndation | becau: | se it | is. (For lines 1 thr | rougl | h 11, cl | neck on | ly one b | ox) | | | | | | | |
| 1 | | A ch | urch, co | onvention | n of ch | nurches | or asso | ociat | ion of churches de | escril | bed in s | section | 170(b)(1 |)(A)(i). | | | | | | | |
| 2 | | A sc | hool de | scribed ii | n sect | ion 170 | (b)(1)(A | A)(ii) | . (Attach Schedule | eЕ) |) | | | | | | | | | | |
| 3 | П | A ho | spital o | га соор | erative | hospi | al servi | ice c | rganızatıon descri | bed | ın sect | ion 170 | (b)(1)(A) | (iii). | | | | | | | |
| 4 | | | | | | | | | conjunction with a | | | | | | (b)(1)(A) | (iii). Ent | er the hos | pital's | | | |
| | | | | and state | | | | | | | | | | | | ` , | | • | | | |
| 5 | | An c | rganiza b)(1)(A) | tion oper (iv). (Co | rated 1 | for the e Part | benefit (| of a | college or univers | ity o | wned o | r operat | ed by a | governi | mental i | init desc | ribed in s | ection | | | |
| 6 7 | x | An c | rganiza | tion that | norm | ally rec | eives a | sub | rnmental unit desc stantial part of its | | | | | | or from | the gene | ral public | describ | ed | | |
| _ | $\overline{\Box}$ | | | 70(b)(1)(| | | - | | - | | | | | | | | | | | | |
| 8 | 님 | | | | | | | | o)(1)(A)(vi). (Comp | | | | | | | | | | | | |
| 9 | _ | from | i activiti stment i | es relate income a | d to it ind un | s exem related | pt funct busine: | tions ss ta | nore than 33-1/3% — subject to certa exable income (les lete Part III) | aın e | xceptio | ns, and | (2) no r | nore tha | an 33-1/ | 3% of its | support | from gre | oss | | |
| 10 | B • • • • • • • • • • • • • • • • • • • | | | | | | | | | | | | | | | | | | | | |
| 11 | | more | e public | ly suppor | rted oi | rganıza | tions de | escri | usively for the ben bed in section 509 and complete line |)(a)(` | 1) or se | ection 50 |)9(a)(2). | ions of, See se | or carry ection 50 | out the 9(a)(3). | purposes Check th | of one e box th | or nat | | |
| | a Type b Type c Type - Functionally integrated d Type - Other | | | | | | | | | | | | | | | | | | | | |
| е | By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) | | | | | | | | | | | | | | | | | | | | |
| f | f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box | | | | | | | | | | | | | | | | | | | | |
| g | | Sinc | e Augus | st 17, 200 | 06, ha | s the o | rganıza | tion | accepted any gift | or c | ontribu | tion fror | n any of | the foll | owing p | ersons? | | V = = | | | |
| | | (i) | A pers | on who o | directl | y or inc | lirectly of the su | cont | rols, either alone or rted organization? | or to | gether v | with per | sons de | scribed | ın (ıı) ar | nd (III) | 11 g (i) | Yes | No | | |
| | | (ii) | | - | _ | - | | | l ın (ı) above? | | | | | | | | 11 g (ii) | | | | |
| | | (iii) | | | | | | | scribed in (i) or (ii) | aho | ve? | | | | | | 11 g (ii | $\overline{}$ | $\overline{}$ | | |
| h | | ` ' | | | | - | • | | upported organization | | | | | | | | 119(| 71 | <u> </u> | | |
| | | | me of sup | | T | (ii) E | | Ť | (III) Type of organizatio | | | s the | (v) Did v | ou notify | (vi) | s the | (vu) Amo | unt of sur | | | |
| | | (1) | organizati | on | | (11) | | | (described on lines 1-9 above or IRC section (see instructions)) | 9 | organiz column (i | ation in i) listed in overning ment? | the organ | nization in n (i) of upport? | organiz | ration in nn (i) ed in the S ? | (vii) Amount of suppor | | port | | |
| | | | _ | | } | | | | | | Yes | No | Yes | No | Yes | No | | | | | |
| (A) | | | | | | | | | - | | | | | | | | | | | | |
| (A) | | | - | | \vdash | | | + | | \dashv | | | | | - | | | | | | |
| <u>(B)</u> | | | | | | | | | - | | | | | | | | | | | | |
| <u>(C)</u> | | | | | | | | | | | | | | | | | | | | | |
| <u>(D)</u> | | | | | | | | | | | | | | | | | | | | | |
| (E) | | | | | | | | | | $ \top $ | | | | | | | | | | | |
| 7_/ | | | | | | | | +- | | \dashv | | | | | <u> </u> | | | | | | |
| Total | _ | | | | | | | | | | • • | 2.55 | | | | | | | | | |
| RAA | 101 | rap | erwork | Reductio | on Act | Notice | , see th | ie In | structions for For | m 99 | ıu or 99 | U-EZ. | | | Schedul | e A (For | m 990 or | 990-EZ | 2010 | | |

Schedule A (Form 990 or 990-EZ) 2010 The Austin Film Society 74-2433823 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Sèc | Sèction A. Public Support | | | | | | | | | | |
|--|---|---|--|--|--------------------------------------|--------------------------------------|---------------|--|--|--|--|
| begi | ndar year (or fiscal year nning in) ► | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total | | | | |
| 1 | Gifts, grants, contributions, and membership fees received (Do not include unusual grants.") | 1,372,942. | 1,558,959. | 2,180,445. | 1,245,636. | 1,432,350. | 7,790,332. | | | | |
| 2 | Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf | | | | | | | | | | |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | | | | | |
| | Total. Add lines 1 through 3 | 1,372,942. | 1,558,959. | 2,180,445. | 1,245,636. | 1,432,350. | 7,790,332. | | | | |
| 5 | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 355,531. | | | | |
| 6 | Public support. Subtract line 5 from line 4 | | 7,434,801. | | | | | | | | |
| Sec | tion B. Total Support | | | | | · | | | | | |
| Cale begi | ndar year (or fiscal year nning in) ► | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total | | | | |
| 7 | Amounts from line 4 | 1,372,942. | 1,558,959. | 2,180,445. | 1,245,636. | 1,432,350. | 7,790,332. | | | | |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 10,594. | 24,169. | 11,091. | 8,007. | 3,570. | 57,431. | | | | |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | | | | | |
| 10 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) | 5,352. | | | | | 5,352. | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | 7,853,115. | | | | |
| 12 | Gross receipts from related activ | ities, etc (see inst | ructions) | | | 12 | 1,361,515. | | | | |
| | First five years. If the Form 990 organization, check this box and | stop here | | d, third, fourth, or | fifth tax year as a | section 501(c)(3) | ▶ [| | | | |
| <u>Sec</u> | tion C. Computation of Pu | | | | | 1 | | | | | |
| 14 | | • | • | e 11, column (f)) | | 14 | 94.67% | | | | |
| 15 | Public support percentage from 2 | | · | | | 15 | 93.72% | | | | |
| | 33-1/3% support test — 2010. If t and stop here. The organization | qualifíes as a pub | licly supported org | ganization | | · | ► <u>x</u> | | | | |
| t | 33-1/3% support test – 2009. If t and stop here. The organization | | | | , and line 15 is 33 | 8-1/3% or more, c | heck this box | | | | |
| 17a 10%-facts-and-circumstances test — 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. | | | | | | | | | | | |
| t | o 10%-facts-and-circumstances te or more, and if the organization in organization meets the 'facts-and | meets the 'facts-ai d-circumstances' | nd-circumstances' test The organiza | test, check this bition qualifies as a | ox and stop here. publicly supporte | Explain in Part I\ d organization | / how the ► | | | | |
| 18 BAA | | | | | | | | | | | |

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

| Sèc | tion A. Public Support | | | | | | | | | | |
|-------|--|-----------------------------|--|---------------------|----------------------|-------------------|-------------|--|--|--|--|
| Calen | dar year (or fiscal yr beginning in)► | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total | | | | |
| 1 | Gifts, grants, contributions and membership fees received (Do not include any unusual grants') | | | | | | | | | | |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | , | | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | _ | | | | | |
| 5 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the | | | | | | | | | | |
| | organization without charge | | | | | | | | | | |
| | Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | | | | | |
| c | Add lines 7a and 7b | | | | | | _ | | | | |
| | Public support (Subtract line 7c from line 6) | | | | | | | | | | |
| Sec | tion B. Total Support | r | ······································ | | | | | | | | |
| Calen | dar year (or fiscal yr beginning in)► | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total | | | | |
| 10 a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | | | | | |
| | Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | r - Vor. | | | | |
| 12 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | | | | | |
| 13 | Total support. (Add Ins 9, 10c, 11, and 12) | | | | | | | | | | |
| 14 | First five years. If the Form 990 organization, check this box and | s for the organiza | tion's first, second | , third, fourth, or | fifth tax year as a | section 501(c)(3) | ▶ □ | | | | |
| Sec | tion C. Computation of Pu | blic Support P | ercentage | | | | | | | | |
| | Public support percentage for 20 | | | 13, column (f)) | | 15 | | | | | |
| | Public support percentage from 2 | • | • • • | | | 16 | % | | | | |
| | tion D. Computation of Inv | | | | | | | | | | |
| 17 | Investment income percentage for | or 2010 (line 10c, o | column (f) divided | by line 13, colum | ın (f)) | 17 | 8 | | | | |
| 18 | | | | | | | | | | | |
| 19 a | 33-1/3% support tests - 2010, If | the organization of | did not check the b | ox on line 14. an | d line 15 is more t | han 33-1/3%, and | | | | | |
| b | is not more than 33-1/3%, check 33-1/3% support tests – 2009. If | the organization of | did not check a box | x on line 14 or lin | e 19a and line 16 | is more than 33.1 | ► | | | | |
| | line 18 is not more than 33-1/3% | , check this box ai | nd stop here. The | organization qua | lifies as a publicly | supported organiz | ation ► | | | | |
| 20 | Private foundation. If the organiz | ation did not chec | k a box on line 14 | , 19a, or 19b, ch | eck this box and se | e instructions | <u> </u> | | | | |

| Schedule A (Form 990 or 990-EZ) 2010 The Austin Film Society | 74-2433823 | Page 4 |
|--|--|--------|
| Part II, line 17a or 17b; and Part III, line 12. Also complete this part for a (See instructions). | ns required by Part II, line 10 any additional information. | 0; |
| Other Income Part II, Line 10 | | |
| Description: Other Income | | |
| 2006: 5352. | | |
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

| | • | | | | |
|-----|---|---|---|---|-------------------------|
| The | Austin Film Society | | | 74-2433823 | |
| Pai | t I Organizations Maintaining Dono | Advised Funds or Other Similar I | Funds or Acc | | e ıf |
| | the organization answered 'Yes' t | o Form 990, Part IV, line 6. | | · | |
| | | (a) Donor advised funds | (b) F | unds and other acc | counts |
| 1 | Total number at end of year | | | | |
| 2 | Aggregate contributions to (during year) | | | | · —— |
| 3 | Aggregate grants from (during year) | | | | |
| 4 | Aggregate value at end of year | | | | |
| 5 | Did the organization inform all donors and don funds are the organization's property, subject t | or advisors in writing that the assets held in the organization's exclusive legal control? | donor advised | Yes | ☐ No |
| 6 | Did the organization inform all grantees, donor used only for charitable purposes and not for the purpose conferring impermissible private bene | ne benefit of the donor or donor advisor, or t | unds can be for any other | Yes | ☐ No |
| Pai | t II Conservation Easements. Compl | ete if the organization answered 'Y | es' to Form 9 | 90, Part IV, line | . 7. |
| 1 | Purpose(s) of conservation easements held by | the organization (check all that apply) | | | |
| | Preservation of land for public use (e.g., re | ecreation or education) Preservati | on of an historica | ally important land a | area |
| | Protection of natural habitat | Preservati | on of a certified l | historic structure | |
| _ | Preservation of open space | | | | |
| 2 | Complete lines 2a through 2d if the organization last day of the tax year. | n held a qualified conservation contribution | in the form of a o | conservation easem | ent on the |
| | add day of the tax year. | ************************************** | | Held at the End of t | he Tax Year |
| ā | Total number of conservation easements | | 2a | Total at the End of the | iic rux reui |
| ı | Total acreage restricted by conservation easen | nents | 2b | | |
| | : Number of conservation easements on a certifi | | 2c | | |
| | Number of conservation easements included in | (c) acquired after 8/17/06, and not on a his | storic | | |
| | structure listed in the National Register | | . 2d | | |
| 3 | Number of conservation easements modified, t tax year ▶ | ransferred, released, extinguished, or termin | nated by the orga | inization during the | |
| 4 | Number of states where property subject to con | nservation easement is located | | | |
| 5 | Does the organization have a written policy regand enforcement of the conservation easemen | s it holds? | - | ∐ Yes | ☐ No |
| 6 | Staff and volunteer hours devoted to monitoring | - · · · · · · · · · · · · · · · · · · · | | • | |
| 7 | Amount of expenses incurred in monitoring, in: • \$ | specting, and enforcing conservation easem | ents during the y | ear | |
| 8 | Does each conservation easement reported on $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(ii)$? | line 2(d) above satisfy the requirements of | section | Yes | ☐ No |
| 9 | In Part XIV, describe how the organization reprinclude, if applicable, the text of the footnote to conservation easements | orts conservation easements in its revenue a the organization's financial statements that | and expense state t describes the or | ement, and balance ganization's accour | sheet, and nting for |
| Pai | t III Organizations Maintaining Colle | ctions of Art, Historical Treasures wered 'Yes' to Form 990, Part IV, II | , or Other Sin | nilar Assets. | |
| 1 a | If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finance | held for public exhibition, education, or resi | venue statement earch in furtherar | and balance sheet vace of public service | works of e, provide, |
| ł | o If the organization elected, as permitted under historical treasures, or other similar assets hel- following amounts relating to these items | SFAS 116 (ASC 958), to report in its revenu d for public exhibition, education, or researc | ue statement and h in furtherance o | balance sheet work of public service, pr | ks of art, ovide the |
| | (i) Revenues included in Form 990, Part VIII, | line 1 | | - \$_ | |
| | (ii) Assets included in Form 990, Part X | | | ► \$ | |
| 2 | If the organization received or held works of ar amounts required to be reported under SFAS 1 | | s for financial ga | in, provide the follow | wing |
| | Revenues included in Form 990, Part VIII, line | 1 | | ► \$ | |
| ı | Assets included in Form 990, Part X | | | ⊳ \$ | |

| 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of items (check all that apply) a Public exhibition b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered 'Yes' to Form 99 Part IV Escrow and Custodial Arrangements. Complete if organization answered 'Yes' to Form 99 | | ection | | | | | | | | | | | |
|--|-------------|-----------------------------|--|--|--|--|--|--|--|--|--|--|--|
| a Public exhibition b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered 'Yes' to Form 99 Part IV Escrow and Custodial Arrangements. Complete if organization answered 'Yes' to Form 99 | | | | | | | | | | | | | |
| b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if organization answered 'Yes' to Form 99 | | | | | | | | | | | | | |
| c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if organization answered 'Yes' to Form 99 | | | | | | | | | | | | | |
| 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if organization answered 'Yes' to Form 99 | 1 | | | | | | | | | | | | |
| Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? [Part IV Escrow and Custodial Arrangements. Complete if organization answered 'Yes' to Form 99 | | | | | | | | | | | | | |
| Part IV Escrow and Custodial Arrangements. Complete if organization answered 'Yes' to Form 99 | | | | | | | | | | | | | |
| Part IV Escrow and Custodial Arrangements. Complete if organization answered 'Yes' to Form 99 | Yes | ∏No | | | | | | | | | | | |
| 9, or reported an amount on Form 990, Part X, line 21. | 0, Part | IV, line | | | | | | | | | | | |
| 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? | | □No | | | | | | | | | | | |
| b If 'Yes,' explain the arrangement in Part XIV and complete the following table: | Yes | | | | | | | | | | | | |
| | Amount | | | | | | | | | | | | |
| c Beginning balance | ariount | | | | | | | | | | | | |
| d Additions during the year | | | | | | | | | | | | | |
| e Distributions during the year | | | | | | | | | | | | | |
| f Ending balance | | | | | | | | | | | | | |
| 2a Did the organization include an amount on Form 990, Part X, line 21? | Yes | No | | | | | | | | | | | |
| b If 'Yes,' explain the arrangement in Part XIV | ٠.٠٥ | □• | | | | | | | | | | | |
| Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line | 10. | | | | | | | | | | | | |
| (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back | | | | | | | | | | | | | |
| 1a Beginning of year balance 263,727. 262,400. 259,868. | | 7 | | | | | | | | | | | |
| b Contributions | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| c Net investment earnings, gains, and losses 1,075. 1,327. 2,532. | | | | | | | | | | | | | |
| d Grants or scholarships | | | | | | | | | | | | | |
| e Other expenditures for facilities and programs 8,900. | | | | | | | | | | | | | |
| f Administrative expenses | | | | | | | | | | | | | |
| g End of year balance 255,902. 263,727. 262,400. | | | | | | | | | | | | | |
| 2 Provide the estimated percentage of the year end balance held as | | | | | | | | | | | | | |
| a Board designated or quasi-endowment ► 21.20 % | | | | | | | | | | | | | |
| b Permanent endowment ► 78.80 % | | | | | | | | | | | | | |
| c Term endowment ►% | | | | | | | | | | | | | |
| 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by | Г ⊽ | es No | | | | | | | | | | | |
| | 3a(i) | X | | | | | | | | | | | |
| The state of the s | 3a(ii) | x | | | | | | | | | | | |
| b If 'Yes' to 3a(II), are the related organizations listed as required on Schedule R? | 3b | - - | | | | | | | | | | | |
| 4 Describe in Part XIV the intended uses of the organization's endowment funds | | | | | | | | | | | | | |
| Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. | | | | | | | | | | | | | |
| Description of investment (a) Cost or other basis (b) Cost or other (c) Accumulated | (d) Boo | ok value | | | | | | | | | | | |
| (investment) basis (other) depreciation | | | | | | | | | | | | | |
| 1 a Land | | | | | | | | | | | | | |
| b Buildings | | | | | | | | | | | | | |
| c Leasehold improvements 1,738,099. 355,772. | | 82,327 | | | | | | | | | | | |
| d Equipment 556,384. 393,027. | | 63,357 | | | | | | | | | | | |
| e Other 10,270. 0. | | 10,270 | | | | | | | | | | | |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) BAA Schedul | | 55,954 m 990) 201 | | | | | | | | | | | |

| Part VII Investments-Other Securities. See Form | n 990, Part X, line | 12. |
|--|---------------------|---|
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
| (1) Financial derivatives | | |
| (2) Closely-held equity interests | | |
| (3) Other | | |
| <u>(A)</u> | | |
| <u>(B)</u> | | |
| <u>(C)</u> | | |
| <u></u> | | |
| <u>(E)</u> | | |
| <u>(F)</u> | | · · · · · · · · · · · · · · · · · · · |
| <u>(G)</u> | | |
| (H) (I) | | 100 ° |
| Total (Column (b) must equal Form 990 Part X, column (B) line 12) | | |
| Part VIII Investments-Program Related. (See Fo | rm 990. Part X. lin | e 13) |
| (a) Description of investment type | (b) Book value | (c) Method of valuation Cost or end-of-year market value |
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| _ (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (10) | | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 13) | | |
| Part IX Other Assets. (See Form 990, Part X, In | ie 15) | |
| (a) Descri | iption | (b) Book value |
| | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| | | |
| (9) | | |
| (10) | | |
| Total. (Column (b) must equal Form 990, Part X, column(B), lir | ne 15) | • |
| Part X Other Liabilities. (See Form 990, Part X, | | |
| (a) Description of liability | (b) Amount | |
| (1) Federal income taxes | | |
| (2) Security Deposits | 25,549 | <u>. </u> |
| (3) | | - |
| (4) (5) | | - |
| (6) | | - |
| (7) | | - ! |
| (8) | | 1 |
| (9) | | <u>'</u> |
| (10) | |] |
| (11) | | |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 25) | 25,549 | 1 |

| Sche | dule D (Form 990) 2010 The Austin Film Society | 74-2 | 433823 | Page 4 |
|------|--|---|--|-----------------|
| Par | | ts | | |
| 1 | Total revenue (Form 990, Part VIII,column (A), line 12) | | 1, | 867,546. |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | | | 191,014. |
| `3 | Excess or (deficit) for the year. Subtract line 2 from line 1 | | | 323,468. |
| 4 | Net unrealized gains (losses) on investments | | | 20,070. |
| 5 | Donated services and use of facilities | | | |
| 6 | Investment expenses | • | _ | |
| 7 | Prior period adjustments | | | |
| 8 | Other (Describe in Part XIV) | | | |
| 9 | Total adjustments (net) Add lines 4 through 8 | | - | 20,070. |
| _ | | | | |
| | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 t XII Reconciliation of Revenue per Audited Financial Statements With Re | venue ner Petu | | 303,398. |
| 1 | Total revenue, gains, and other support per audited financial statements | venue per retu | 1 | 083,512. |
| | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | <u>' </u> | 063,312. |
| | | 20 070 | 1 | |
| | · · · · · · · · · · · · · · · · · · · | 20,070. | | |
| | | 195,896. | | |
| | Recoveries of prior year grants | | | |
| | Other (Describe in Part XIV) | | | |
| | Add lines 2a through 2d | | | <u>215,966.</u> |
| 3 | Subtract line 2e from line 1 | <u></u> : | 3 1, | 867,546. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1. | | | |
| а | Investments expenses not included on Form 990, Part VIII, line 7b | | | |
| b | Other (Describe in Part XIV) . 4b | | | |
| c | : Add lines 4a and 4b | 4 | 4 c | |
| 5 | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) | į | 5 1, | 867,546. |
| Par | t XIII Reconciliation of Expenses per Audited Financial Statements With E | xpenses per Re | eturn | |
| 1 | Total expenses and losses per audited financial statements | 1 | 1 2, | 386,910. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | | |
| а | Donated services and use of facilities 2a | 195,896. | | |
| b | Prior year adjustments 2b | | | |
| | Other losses 2c | | | |
| | d Other (Describe in Part XIV.) | | | |
| | Add lines 2a through 2d | | _ 2 e | 195,896. |
| | Subtract line 2e from line 1 | | T T | 191,014. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | <u> </u> | -, | |
| · | Investments expenses not included on Form 990, Part VIII, line 7b | | 1 | |
| | O Other (Describe in Part XIV) | | | |
| | Add lines 4a and 4b | - 4 | 4 c | |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) | | 5 2, | 191,014. |
| Par | t XIV Supplemental Information | | | |
| Part | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b additional information | and 4; Part IV, lines Also complete this (| 1b and 2b; part to provid | le |
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| BAA | TEEA3304 02/11/11 | Sc | hedule D (Fo | rm 990) 2010 |

| Schedule D (Form 990) 2010 The Austin Film Society | 74-2433823 | Page 5 |
|---|------------|-------------|
| Schedule D (Form 990) 2010 The Austin Film Society Pårt XIV Supplemental Information (continued) | | |
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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545 0047

2010

Open to Public Inspection

| Name of the organization | | | | | Limpioyer lacintinea | |
|---|----------------------------|--------|--|---|--|---|
| The Austin Film Society | | | | | 74-243382 | <u> </u> |
| Part I Fundraising Activities. Complete if the complete Form 990-EZ filers are not required to complete. | organizatio omplete thi | n ans | swered 'Ye | s' to Form 990, Part IV, | line 17 | |
| Indicate whether the organization raised fund Mail solicitations Internet and email solicitations Phone solicitations | s through a | any o | е | Solicitation of non-g Solicitation of gover | overnment grants nment grants | |
| d X In-person solicitations 2 a Did the organization have a written or oral agemployees listed in Form 990, Part VII) or en | tity in coni | nectio | on with pro | fessional fundraising se | rvices? | X Yes No |
| b If 'Yes,' list the ten highest paid individuals or compensated at least \$5,000 by the organiza | r entities (1 tion. | tunara | aisers) pur | suant to agreements un | der wnich the fundraise | r is to be |
| (i) Name and address of individual or entity (fundraiser) (ii) Acti | have | custoc | fundraiser dy or control ibutions? | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in column (i) | (vi) Amount paid to (or retained by) organization |
| | Y | es | No | | | |
| 1 Armbruster Consulting 11404 Woodla Interim De | velop | | х | 0. | 24,600. | -24,600. |
| 2 | | | | | | |
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| 9 | | | | | | |
| 10 | | | | | | |
| T-A-1 | 1 | | . | 0 | 24 600 | 24 600 |
| Total 3 List all states in which the organization is reg or licensing | istered or | licen | | 0. cit contributions or has t | 24,600. peen notified it is exemp | -24,600. ot from registration |
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| | | | | | | | | | | |

Page 2

| -, | | and 6a. List events with gross re | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events (add column (a) |
|-----------------|--|--|---------------------------|---|------------------|--|
| RE | | | Auction (event type) | (event type) | (total number) | through column (c)) |
| REVENUE | 1 | Gross receipts | 73,320. | | | 73,320. |
| Ē | 2 | Less Charitable contributions | 73,320. | | | 73,320. |
| | 3 | Gross income (line 1 minus line 2) | 0. | | | 0. |
| | 4 | Cash prizes | | | | |
| D | 5 | Noncash prizes | | | | |
| RECT | 6 | Rent/facility costs | | | | |
| | 7 | Food and beverages | | | | |
| E X P | 8 | Entertainment | | | | |
| EXPENSES | 9 | Other direct expenses | | | | |
| S | 10 | | | | | |
| Das | 11 t III | Net income summary Combine line 3, c Gaming. Complete if the organization | 0. | | | |
| Га | · III) | \$15,000 on Form 990-EZ, line 68 | ported more than | | | |
| REVEZUE | | | (a) Bingo | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add column (a) through column (c)) |
| Ē | 1_ | Gross revenue | | | | |
| , E | 2 | Cash prizes | | | | |
| DIRECT | 3 | Non-cash prizes | | | | |
| Č S T E S | 4 | Rent/facility costs | | | | |
| | 5 | Other direct expenses | | | | |
| | 6 | Volunteer labor | Yes% | Yes% | Yes% | |
| | 7 | Direct expense summary Add lines 2 th | rough 5 in column (d) | | • | |
| | 8 | Net gaming income summary Combine | lines 1, column (d) and l | ine 7 | • | |
| | Ente | er the state(s) in which the organization or | | | | Yes No |
| | ls th | ne organization licensed to operate gaming | | | | |
| ā | ls th | ne organization licensed to operate gaming o,' explain | | · | | |
| 10 a | Is the Is | | es revoked, suspended o | r terminated during the t | tax year? | Yes No |

| Sche | edule G (Form 990 or 990-EZ) 2010 The Austin Film Society | 74-2433823 | Page 3 |
|------|--|---|-----------------|
| - | Does the organization operate gaming activities with nonmembers? | Yes | No |
| 12 | Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity for administer charitable gaming? | med to | ☐ No |
| 13 | Indicate the percentage of gaming activity operated in: | 1 1 | |
| | a The organization's facility | 13a | 9. |
| | b An outside facility | 13b | |
| | Enter the name and address of the person who prepares the organization's gaming/special events books and | | |
| | Name ► | | |
| | Address ► | | |
| 15 a | a Does the organization have a contact with a third party from whom the organization receives gaming revenue | ? Tes | □No |
| ı | b If 'Yes,' enter the amount of gaming revenue received by the organization ► \$ and | | |
| | of gaming revenue retained by the third party > \$ | | |
| • | c If 'Yes,' enter name and address of the third party | | |
| | Name • | | |
| | Address ► | | |
| 16 | Gaming manager information | | |
| | Name ► | | |
| | Gaming manager compensation ► \$ | | |
| | Description of services provided | | |
| | ☐ Director/officer ☐ Employee ☐ Independent contractor | | |
| 17 | Mandatory distributions | | |
| 1 | a Is the organization required under state law to make charitable distributions from the gaming proceeds to reta state gaming license? | ain the | No |
| I | b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sorganization's own exempt activities during the tax year \(\bigsir \)\$ | spent in the | |
| Ŗäi | Supplemental Information. Complete this part to provide the explanations require columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as appeared this part to provide any additional information (see instructions). | ed by Part I, line dicable. Also cor | e 2b, nplete |
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1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990. Grants and Other Assistance to Organizations, Governments and Individuals in the United States Part I General Information on Grants and Assistance The Austin Film Society Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE 1 (Form 990)

Open to Public Inspection

Employer identification number

74-2433823

OMB No 1545-0047 2010

| Schedule I (Form 990) 2010 | Sche | 10/29/10 | TEEA3901 | | for Form 990. | , see the Instructions | BAA For Paperwork Reduction Act Notice, see the Instructions for Form |
|------------------------------------|--|---|--|---|----------------------------------|--|---|
| 13 | | | | | | ons | 3 Enter total number of other organizations |
| 0 | • | | | | ganizations | s) and government org | |
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| Cover producti | | | | 7,000. | | 45-2544829 | (1) Computer Chess4015_Cherrywood_RdAustin_TX 78722 |
| (h) Purpose of grant or assistance | (g) Description of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (e) Amount of non-cash assistance | (d) Amount of cash grant | (c) IRC section if applicable | (b) EIN | 1 (a) Name and address of organization or government |
| ±3,000. | | | וופכא נוווז מטא וו ווס | 1016 (11all 40,000. C | is needed | additional space | Part II can be duplicated if additional space is need |
| es' to \$5.000. | tion answered 'Y | te if the organizar | ed States. Comple heck this box if no | I Organizations in the United States. Complete if the organization answered 'Yes' to served more than \$5,000. Check this box if no one recipient received more than \$5,000. | | nce to Governme for any recipient | Part II Grants and Other Assistance to Governments and Form 990. Part IV. Ine 21 for any recipient that rec |
| X Yes No | <u>)</u> | | ates | use of grant funds in the United States | | e grants or assistance procedures for monit | the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the users. |
| | <u>a</u> | grants of assistance, | | life diality of assistance, life dialitees engininty for the grants of assistance, and | | is to substantiate the | |

Page 2 Schedule I (Form 990) 2010 The Austin Film Society

[Partill Schauts and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

| () Description of non cash assistance | Kodak Film Stock | Post production Services | | | | | | and any other additional information. | | | | <u>rovided to</u> | | | <u>ona1</u> | tions. | <u>with</u> | |
|---|---------------------|--------------------------|---|---|---|---|---|--|---------------------------|---|----------------------------------|---------------------------------------|-------------------------------------|---|--|--|--|---|
| (e) Method of valuation (book, FMV, appraisal, other) | FMV | FKV | | | | | | line 2, | (TEPF) | | to_emerging_ | Awards of up to \$15,000 are provided | | s on the Fund and | Workshops are given in conjunction with regional | and with co-presenting media arts organizations. | Applicants are also encouraged to make preliminary review consultations with | TFPF staff prior to the deadline. TFPF staff reviews the applications and |
| (d) Amount of non-cash assistance | 6,000. | 5,000. | | | | | | ion required in Pa | Production Fund (| 1 | es_annual_grants | | and_creativity | ional workshop | given in conju | p <u>resenting me</u> ć | eliminary revi | taff reviews t |
| (c) Amount of cash grant | 100,000. | 100,000. | | | | | | o provide the information required in Part I, | Filmmakers' Pro | | ction Fund makes | state of Texas. | Promise, skill, | state giving informational workshops on the | Workshops are | and with co- | ged_to_make_pr | dline. TFPF s |
| (b) Number of recipients | 95 | 56 | | | | | | lete this part to pr | Society Texas E | EW | maker's Production | | | ir the state g: | - 1 | Conferences | also encoura | or to the dead |
| (a) Type of grant or assistance | 1 Grants to artists | 2 Grants to artists | 3 | 4 | 5 | 9 | 7 | PartilV Supplemental Information. Complete this part t | Pt_I_Line_2Austin_Film_So | Pt_I_Line_2PROGRAM_OVERVIEW | Pt I Line 2The Texas Filmmaker's | Pt_I Line 2and video artists in the | Pt I Line 2artists whose work shows | TFPF staff tour the | grant-writing guidelines. | film_festivals, conferences, | Applicants are | <u>TFPF_staff_pri</u> |

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

| The Austin Film Society | 74-2433823 |
|---|----------------------------------|
| Pt_VI-B, Line 11a Form 990 is reviewed by the Finance Com | mmittee of the Board |
| of Directors. A pdf copy is emailed to | o the Finance Committee |
| for review prior to filing Form 990. | |
| Pt VI-B, Line 12c The conflict of interest policy is cont | ained in the employee |
| handbook which every employee is issued | l_and_must_sign |
| in acknowledgement. Also, a conflict o | of_interest_policy |
| is distributed to each board member at | the first board |
| | turn_in |
| signed acknowledgements. | |
| Pt VI-B, Line 15 The Executive Director is given a job pe | rformance review annually by the |
| Board of Directors, all of which are inde | ependent. The Board uses data of |
| comparable compensation for similarly q | ualified persons |
| in comparable positions at similar orga | nizations in the salary |
| determination of the Executive Director | The annual review |
| is documented. Staff salaries are deter | mined by the |
| Executive Director and approved by Boar | d Members. |
| Pt VI-C, Line 19 The Financial Statements are given to t | the City of Austin. |
| All other documents are available upon | request. |
| Pt XI Page 12, Part XI, Line 5 Other changes | in Net Assets: |
| Unrealized gains on investment not incl | uded \$20,070 |
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Additional Information

Form 990 (2010) Page 1, Part I, line 1 and Page 2, Part III, line 1

Statement A

The Austin Film Society is organized exclusively for charitable and educational purposes and for lessening the burdens of government, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code. Without limiting the foregoing, these purposes may be accomplished through educating the public as to the virtue and rewards of viewing classic, international and rarely-seen films and multimedia productions; educating the public as to the techniques of creating and distributing such films; and supporting creative filmmaking by providing equipment, facilities, grants, scholarships, fiscal sponsorship and the like.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

Describe the exempt purpose achievements for each of the organization's other program services. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

| each pro | ogram service repo | orted | |
|-------------------|--------------------|--|--|
| Code: | Description: | Exhibition: AFS selects more than 100 films to | |
| Expenses | 154,416. | showcase in a cultural context each year, from a | |
| Grants Of | 0. | wide variety of genres, eras and cultures. AFS | |
| Revenue | 117,483. | utilizes original program notes, scholarly intro | |
| | | ductions and visiting artists to enhance the edu | |
| | | cational and aesthetic value for the audience. | |
| | | | |
| Code [.] | Description: | Community Education: Programs include free after- | |
| Expenses | 139,121. | school programs at 15 under-resourced schools; | |
| Grants Of | 0. | summer camps, including scholarship slots for | |
| Revenue | 98,416. | after-school participants; Moviemaker Dialogues; | |
| | | an internship program with workshops, hands-on | |
| | | training and a job referral component; tours of | |
| | | Austin Studios and the online journal "Slackerwood". | |
| Code· | Description. | Premieres: | |
| Expenses | 140,798. | AFS holds regional premieres with directors and | |
| Grants Of | 0. | cast members in attendance with proceeds to benefit | |
| Revenue | 150,976. | all programs and services. | |
| • | | | |
| | | | |

Schedule I (Form 990) - Part IV - Supplemental Information (continued) Schedule I (Form 990) - Part IV - Supplemental Information (Continuation Sheet)

| provides feedback, offering suggestions for improvement. Phone appointments |
|---|
| are available for out-of-town applicants. |
| Applications are processed and reviewed for completeness. They are then split |
| for preliminary review with a mix of narrative, documentary, animation, and experimental |
| applications going to each evaluator. The top-scoring applications (roughly one-third) |
| are reviewed at full panel session in Austin. Panelists make funding decisions regarding |
| the final recipents and the amount awarded. |
| |
| PROGRAM GUIDELINES |
| Eligibility and restrictions |
| * Application must be made by the creative author of the final work. |
| * Applicant must have resided in Texas for at least 1 year prior to the application date. |
| * All genres of film or video are given equal consideration. AFS is unable to consider multimedia projects. |
| * Projects must be "independent productions", meaning under the artistic, budgetary and |
| editorial control of the individual owning copyright. No consideration will be given to industrial or |
| promotional pieces or "works-for-hire". |
| * Application must be for the production, post-production or distribution stages. No consideration |
| will be given for applications requesting pre-production or development funds. |
| * AFS staff and Board Members and TFPF interns are ineligible to apply. |
| |
| CRITERIA FOR REVIEW |
| Essential factors considered by panelists include: |
| * The quality of the proposed work based on the description, realistic budget, |
| and supporting materials |
| * The likelihood that the work will be completed. |
| * The applicant's demonstrated ability and creativity as seen in the representational |
| work (film video, or script) submitted. |
| |
| APPLICATION PROCESS |
| Applicants are asked to submit: |
| * Application form and budget |
| * Project description (1-3 pages) |
| * Project timeline (1 page) |
| * Optional support material (no more than five pages) |
| * Proof of TX residency |
| * Video sample |
| * Treatment or script (optional) |
| Applications must be mailed to the Austin Film Society by the postmark deadline. |
| Applications can also be submitted online. |