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**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

Department of the Treasura

	intern	ai Reve	Information about Form 990 and its instructions is	at www.ir.	•	Inspection		
	A F	or the	e 2014 calendar year, or tax year beginning AUG 1, 2014 and e	ending J	UL 31, 2015			
	Вс	heck if oplicable	C Name of organization		D Employer identific	cation number		
	_	Addre:	arizona technology council foundation					
	$\vdash$	Name			20-1	185167		
	$\vdash$	Jchang ∏Initial		) /- · · · · ·				
	는	_Ireturn ∏Fıṇal	, ,	Room/suite	E Telephone number			
	Ц	return		.920		422-9463		
		ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	460,891.		
		Amend	PHOENIX, AZ 85004		H(a) Is this a group re			
	$ldsymbol{ld}}}}}}$	Application	F Name and address of principal officer. 5 1 E V EIV 2115 1 KA		for subordinates	? Yes X No		
		pendir	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No		
	<u> 1 T</u>	ах-өх	empt status. X 501(c)(3) 501(c)( ) ( (insert no.) 4947(a)(1) or	r 🔙 527	If "No," attach a	list (see instructions)		
	JV	Vebsit	te: WWW.AZTECHCOUNCIL.ORG/FOUNDATION		H(c) Group exemption	n number 🕨		
	<b>K</b> F	orm of	organization: X Corporation Trust Association Other	L Year	of formation: 2004 M	State of legal domicile: AZ		
		rt I	Summary					
		1	Briefly describe the organization's mission or most significant activities: TO PR	OVIDE	NON-PROFIT	, INDUSTRY,		
	ž		AND ACADEMIA GRANTS AND AWARDS TO FURTHER					
	Activities & Governance		Check this box   if the organization discontinued its operations or dispose					
	Š		Number of voting members of the governing body (Part VI, line 1a)		3	6		
1 4 2015	ß		Number of independent voting members of the governing body (Part VI, line 1b)		4	5		
20	oğ V		Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	0		
4	ţį				<del> </del>	150		
best)	ξį		Total number of volunteers (estimate if necessary)		6	0.		
$\mathbf{c}$	Ac	!	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.		
DEC		b	Net unrelated business taxable income from Form 990-T, line 34	<del></del>				
			RECEIVED	-	Prior Year	Current Year		
SCANNED	ne		Contributions and grants (Part VIII, line 1h)	וטוּ 📙	412,399.	457,592.		
Z:	Revenue		Program service revenue (Part VIII, line 2g)	RS-05C	0.	0.		
	ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) NQV 2 0 2015	X	723.	799.		
उ	_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	[쯦]	45.	2,500.		
<b>W</b>		12	Total revenue - add lines 8 through 11 (must equal Part VIII, columni(A), line 12)		413,167.	460,891.		
		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	/	0.	0.		
		14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
	S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.		
	Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
	g.	ь	Total fundraising expenses (Part IX, column (D), line 25)	0.				
	Ω	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		300,688.	392,339.		
			Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		300,688.	392,339.		
		19	Revenue less expenses Subtract line 18 from line 12		112,479.	68,552.		
	Net Assets or Fund Balances			Ве	ginning of Current Year	End of Year		
	and	20	Total assets (Part X, line 16)		287,019.	358,719.		
	Ass		Total liabilities (Part X, line 26)		7,722.	10,870.		
	<u>₹</u> Ĕ		Net assets or fund balances. Subtract line 21 from line 20		279,297.	347,849.		
	Pa	rt II				341,043.		
			lities of perjury, I declare that I have examined this return, including accompanying schedules	and etatem	ente and to the heet of my	/ knowledge and helief it is		
		•	it, and complete. Declaration of pregar <u>er (o</u> ther than officer) is based on all information of whi		•	Kilowicuyc aliu bellel, it is		
	uue,	correc	it, and complete. Declaration of pregater (onless than officer) is based on an information of while	icii piepaiei		11. 2.10		
	۵.		Signature of officer		Date Not	1. 16,2015		
	Sigi		l'		Duit			
	Her	В	STEVEN ZYLSTRA, PRESIDENT/CEO Type or print name and title	· · · · · · · · · · · · · · · · · · ·				
				Date Check	PTIN			
			Print/Type preparer's name  Preparer's signature	CPA	Date Check	<b>-</b>		
	Paid		JEREMY BOTTLINGER	11/16/15 self-employe	□ P01317718			
		arer	Firm's name WALLACE, PLESE + DREHER, LLP		Firm's EIN	86-0841383		
	Use	Only	Firm's address 500 N. JUNIPER DRIVE, SUITE 275					
			CHANDLER, AZ 85226		Phone no. <b>( 4</b> )	80) 345-0500		

May the IRS discuss this return with the preparer shown above? (see instructions)

X Yes

	rt III Statement of Program Service Accomplishments	210/	Page 4
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly-describe the organization's mission:		
•	TO PROVIDE NON-PROFIT, INDUSTRY AND ACADEMIA GRANTS AND AWARDS	то	
	FURTHER PROMOTE AND GROW TECHNOLOGY IN ARIZONA THROUGH RAISING		
	FUNDS, LEADERSHIP, COLLABORATION, AND INNOVATION.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total e	xpenses, a	and
	revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$		)
	PROVIDE INDUSTRY AND ACADEMIA GRANTS AND AWARDS TO FURTHER PRO		
	GROW TECHNOLOGY IN ARIZONA AND FOCUS ON IMPROVING SCIENCE, TEC	HNOLO	GY,
	ENGINEERING, AND MATH EDUCATION IN ARIZONA.		
		<del></del>	
			<del></del>
4b	(Code) (Expenses \$		
40	(Code) (Expenses \$ including grants of \$ ) (Revenue \$		,
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$		)
		<del></del>	
			<del></del>
4d			
	(Expenses \$ including grants of \$ ) (Revenue \$		
<u>4e</u>	Total program service expenses ► 362,827.		90 (2014)
		rom 🔊	<b>2U</b> (2U14)

			1	
4	le the expension decayled in each on 501(a)(2) or 4047(a)(1) (at heather a remark foundation)		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A		<b>3</b> 7	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	1	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_2_	X	-
3	public office? If "Yes," complete Schedule C, Part I			v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3_	<del> </del>	X
7	during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	<del>  "</del> -	<del> </del>	
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	1	х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
•	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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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 temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
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	11b		X
Ç	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	44.		х
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	11c		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			7.7
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		<u>X</u>
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	46		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	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
19	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		Х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Ear-	agn a	0044

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and III 2. Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III 2. Did the organization answer "Yes" to Part IX, Isochon 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 II, Parts I and III 2. Schedule IX if "Yes," or In the Yes III and III 2. Did the organization have a tax-exempt bonds suse with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule IX II "Yes," to see III as IIII as III as III a				Voc	Na
domestic government on Part IX, column (A), line 17 if I**es*, "complete Schedule I, Part I and II 2	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	•	Yes	No
22 List the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, counting fives, complete Schedule I. Part IX and III 22 List 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 Is and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule K. If "No"; go to line 25a			21		x
Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VIII, 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 I, Part III and 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, that was issued after December 31,2002? If "Yes," answer lines 24b through 24d and complete Schedule III "No", go to line 25s  b Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary penid exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penid exception?  Did the organization and acts as in on behalf off issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds?  Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year?  Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year?  Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule I, Part IV is nettrictions for applicable fling thresholds, conditions, and exceptions?  A current or former officer, director, trustee, or key employees, or disqualified persons? If "Yes," complete Schedule I, Part IV is nettrictions for applicable fling thresholds, conditions, and exceptions?  A current or former officer, director, trustee, or key employees, or disqualified persons? If "Yes," complete Schedule I, Part IV is nettriction for applicable fling thresholds, conditions, and exceptions?  A current or former officer, director, trustee, or key employees, or a family member of a current or forme	22				
23 Did the organization answer "Yes" to Part VII, Section A, Ine 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 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31,2002? If "Yes," examer ines 24b through 24d and complete Schedule K. If "No", go to line 25s Did the organization maintain an escrow account other than a refunding escrow at any time during the year 10 defease any tax-exempt bonds?  1 Did the organization maintain an escrow account other than a refunding escrow at any time during the year?  2 Sa Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I are scaled person during the year? If "Yes," complete Schedule L, Part I be the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I be the organization aware that it engaged in an excess benefit transaction with a following part of a post-EZP If "Yes," complete Schedule L, Part I be the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, frustees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part IV and the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV and the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV and any member of a current or former officer, director, frustee, or key employee of a farmly member of a full member of any of these persons? If "Yes," complete Schedule R, Part IV and any member of a current or for	_		22		х
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24a Dd 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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. I"No", go to line 25a  b Dd the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?  24b	23				
Schedule / 24 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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25s		· · · · · · · · · · · · · · · · · · ·			
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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25e  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds evidence any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? defease any tax-exempt bonds outstanding at any time during the year? defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? defease any tax-exempt bonds outstanding at any time during the year to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? defease any tax-exempt bonds outstanding at any time during the year? defease any tax-exempt on the organization engage an an excess benefit transaction with a disqualified person in a prory year, and that the transaction with an disqualified person in a prory year, and that the transaction with an disqualified person in a prory year, and that the transaction has not been reported on any of the organization provide a grant or other assistance to an officer, director, trustee, exe ye employees, bustantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV  Did the organization provide a grant or			23	Х	
last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a  Did the organization mental an ascrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  24c  Did the organization maintain an ascrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  24d  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issue for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization are ware that it engaged in an excess benefit transaction with a disqualfied person in a prior year, and that the transaction with a disqualfied person in a prior year, and that the transaction has not been reported on any of the organization is prior Forms 990 or 990-E27 If "yes," complete Schedule L, Part II Esb University of the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualfied persons? If "yes," complete Schedule L, Part III Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of a current or former officer, director, trustee, or key employee? If "yes," complete Schedule L, Part IV instruction, or director, trustee, or key employee? If "yes," complete Schedule L, Part IV instruction, or director, trustee, or key employee? If "yes," complete Schedule L, Part IV instruction, or officer, director, trustee,	24a				
Schedule K. If 'No', go to line 25a Did the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? Did the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? Did the organization minest any proceeds of tax exempt bonds beyond a temporary penod exception? Did the organization invest any proceeds of tax exempt bonds outstanding at any time during the year to defease any tax-exempt bonds? Did the organization at as an 'on behalf of' issuer for bonds outstanding at any time during the year? Did the organization avaire 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 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contribution or employee thereof, a grant aselection committee member, or to a 55% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Was the organization approach of fine provided in the properties of the following parties (see Schedule L, Part IV By A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV By A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV By A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV By By A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV By					
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any tax-exempt bonds?  d	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  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 pinor Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II and the transaction report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II and the organization provide a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II and the following parties (see Schedule L, Part IV and the proposed of the following parties (see Schedule L, Part IV and the parties of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV and the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV and the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II and the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part II and the organization will advise the organization and sections of an entity disregarded as separate from the organization under Regulations sections 301,7701-37 If "Yes," complete Schedule R, Part I and the organization of an entity disregarded as separate from the organization under Regulations sections 301,7701-37 If "Yes," complete Schedule R, Part II, III, or IV, and Part V, li	С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
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director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I  33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  34 Was the organization have a controlled entity within the meaning of section 512(b)(13)?  35 If "Yes" to line 35a, 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  36 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 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 Section 501(c)(3) 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 V, Ines 1 The All Theorem 990 filers are required to complete Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19?	b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30		•			X
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Part V, line 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35a Section 512(b) (13)? If "Yes," complete Schedule R, Part V, line 2  35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  35b If "Yes," complete Schedule R, Part V, line 2  36c Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  36c If "Yes," complete Schedule R, Part V, line 2  37c 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  37c A X  38d Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	•	·	33		
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Note. All Form 990 filers are required to complete Schedule O	35		31		
	<i></i>		38	x	
					(2014)

# Form 990 (2014) ARIZONA TECHNOLOGY COUNCIL FOUNDATION Part V Statements Regarding Other IRS Filings and Tax Compliance

_	Check if Schedule O contains a response or note to any line in this Part V				$\sqcup$
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 12			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming			
	(gambling) winnings to prize winners?	1 1	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				İ
	filed for the calendar year ending with or within the year covered by this return	2a 0			1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined	ns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s) .			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0 .	3b		
4a	At any time during the calendar year, $\operatorname{did}$ the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country ►				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR)			l
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		_X_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		<b></b>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization solicit			l
	any contributions that were not tax deductible as charitable contributions?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				l
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		<b>-</b>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required	_		77
	to file Form 8282?	1 1	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	_		v
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution or a personal benefit contribution of published intelligence of the personal benefit contribution of published intelligence of the personal benefit contribution of the personal benefit contributi		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations maintaining depart advised funds. Did a depart advised fund maintaining depart advised funds.		7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained sponsoring organization have excess business holdings at any time during the year?	by tile	8		İ
9	Sponsoring organizations maintaining donor advised funds.		-		
•	Did the sponsoring organization make any taxable distributions under section 4966?		9a		1
h	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		ļ
10	Section 501(c)(7) organizations. Enter		30		
. а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			ł
11	Section 501(c)(12) organizations. Enter.				l
а	Gross income from members or shareholders	11a			l
b	Gross income from other sources (Do not net amounts due or paid to other sources against				l
	amounts due or received from them.)	11b			ł
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		L
	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.				ļ
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O				<u> </u>
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1 1			l
	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c	ļ		<u></u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a	$oxed{oxed}$	Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O	14b	لييا	
			Г	OOA.	/OO4 41

20-1185167 ARIZONA TECHNOLOGY COUNCIL FOUNDATION Form 990 (2014) Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 5 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X 7a more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X 7b persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a Х **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c Х 13 13 Did the organization have a written whistleblower policy? X Did the organization have a written document retention and destruction policy? 14 14 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? 15a a The organization's CEO, Executive Director, or top management official X **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X 16a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's 16b exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶AZ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Own website X Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records •

ANNE RODY - 602-422-9463

2800 N CENTRAL AVE, SUITE 1920, PHOENIX,

85004

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### ARIZONA TECHNOLOGY COUNCIL FOUNDATION

20-1185167

Page 7

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

Check if Schedule O contains a	response or note	to any line in	this Part VII
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Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a 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

(A) Name and Title	(B) Average hours per week	box	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) STEVEN ZYLSTRA	5.00								004 454	40 545	
PRESIDENT/CEO		X		X		_		0.	324,454.	13,715	
(2) QUINN WILLIAMS	1.00	ł									
SECRETARY		X	_	X		-		0.	0.	0 .	
(3) DAVID ALBERTY	1.00	ļ						,			
CHAIRMAN/TREASURER		X		X	<u> </u>	ļ		0.	0.	0 .	
(4) CATHLEEN BARTON	1.00	┨									
DIRECTOR	1 22	X	-	<u> </u>				0.	0.	0 .	
(5) HAROLD WONG	1.00	┨							_	_	
DIRECTOR	- 1 00	X		_	_	_		0.	0.	0	
(6) SUSAN SHULTS	1.00	X	1					0.	0.	0	
DIRECTOR											
		-	_		_						
		_									
		-									
		╀						_			
		-									

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Name and title    Average   Nourse pur   Concess passes in each incurse passes   Concess passes in each incurse passes   Concess passes   Conces	ı aı	T VII   Section A. Officers, Directors, Trus		ploy	ees			ghe	st C			1		·=\	
Compensation from the organization is a tary compete Schedule J for such individual from an elated organization from the organizat		(A)	(B)			•	•	1		1		l	_	(F)	
Compensation from the organization   Compensation   Compensation from the organization   Compensation from the organization   Compensation from the organization   Compensation		Name and title	1		not c	heck	more	than		1 '	· ·				
Compensation   Comp			1							1	•				
1b Sub-total Contractors of the organization of the calendar year ending with or within the organization Report compensation for the calendar year ending with or within the organization Report compensation for the calendar year ending with or within the organization Report compensation for the calendar year ending with or within the organization Report compensation for the calendar year ending with or within the organization Report compensation for the calendar year ending with or within the organization Report compensation for the calendar year ending with or within the organization or individual for services  1 Complete this table for your five highest compensated independent contractors that received or accent compensation for many unrealized organization or individual for services  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization tax year  (A)  Name and business address  NONE  Description of services  2 Total number of independent contractors (including but not limited to those listed above) who received more than			(list any	횮											
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Total fumber of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization compensation from the organization of line 1a? If "Yes," complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and elated organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such individual for services rendered to the organization? If "Yes," complete Schedule J for such individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  NONE  Description of services  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than			Il Section A								321/1	$\overline{}$		<u>, , , , , , , , , , , , , , , , , , , </u>	
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization of line 1a? If "Yes," complete Schedule J for such individual and related organization sisted on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such individual or services rendered to the organization? If "Yes," complete Schedule J for such individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization? Report compensation for the calendar year ending with or within the organization's tax year  (A) (B) (C) Compensation  Name and business address NONE  Description of services  2 Total number of independent contractors (including but not limited to those listed above) who received more than			ii, occiion A								324.4		1	3.7	
Compensation from the organization   Yes   No  3			not limited to th	IOSE	liste	ed a	bov	e) wt	no re	·				<u></u>	
Ves   No	_	· · · · · · · · · · · · · · · · · · ·						-,			,000 01 10 00 01 100				0
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For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  (B)  (C)  Compensation  NONE  Description of services  2 Total number of independent contractors (including but not limited to those listed above) who received more than					•	•		•		•	•		3		Х
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rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A) (B) (C)  Name and business address NONE  Description of services  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than		-			-					•	_		4	X	
Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A) (B) (C)  Name and business address NONE  Description of services  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than	5	Did any person listed on line 1a receive or	accrue compei	nsat	ion 1	rom	any	y unr	elat	ed organization or indivi	dual for services	. [			
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the organization Report compensation for the calendar year ending with or within the organization's tax year  (A) (B) (C) Compensation  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than	Sec	tion B. Independent Contractors													
(A) Name and business address NONE Description of services Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than	1	Complete this table for your five highest co	mpensated in	dep	ende	nt c	onti	racto	ors t	that received more than	\$100,000 of com	npensa	ation f	rom	
Name and business address NONE Description of services Compensation    Description of services   Compensation		the organization Report compensation for	the calendar y	ear	endı	ng v	vith	or w	ıthır	n the organization's tax	/ear				
2 Total number of independent contractors (including but not limited to those listed above) who received more than												_			
		Name and business address NONE Description of services								C	omper	nsatio	<u>'n</u>		
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		Total number of independent contractors /	ınalı ıdına but -	ot !:	mrte	d +c	the	oc l		d abovo) who received =	oro than	_			
	2		-	iot II		<b>u</b> 10		_	31 <del>0</del> 0	above, who leceived it	IOIE UIAII				

		Check if Schedule O conf	ains a response	or note to any line	in this Part VIII			
	•	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under sections 512 - 514
ts ts	1 a	Federated campaigns	1a					
眶뒤	b	<del>.</del>	1b					İ
آڅ تي	c		1c					
a it	d		1d					
S,E	e	Government grants (contribut						
<u>S</u> S	f	All other contributions, gifts, gran						
돌	•	similar amounts not included abo		457,592.				
ĒΫ	g	Noncash contributions included in lines	1a-1f \$					
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f		<b></b>	457,592.			
				Business Code				
မွ	2 a							
اه ڲٙ	b							
Program Service Revenue	C							
e a	d							
<u>6</u>	е							
ا ته	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f		<u> </u>			··········	ļ
	3	Investment income (including	dıvıdends, intere	est, and				
		other similar amounts)		▶	799.			799.
	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨				
	5	Royalties		, <b>•</b>				
			(i) Real	(II) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
	С	Rental income or (loss)				i		
	d	· ·		<u> </u>				
	7 a	Gross amount from sales of	(i) Securities	(ıi) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
	С	Gain or (loss)			!			1
	d	• , ,						
9	8 a	Gross income from fundraisin	-					
Ven		including \$						
Other Rever		contributions reported on line	•					
je		Part IV, line 18	a					
₽		Less: direct expenses	b					
		Net income or (loss) from fund	_					<del>                                     </del>
	y a	Gross income from gaming at Part IV, line 19						
	_	Less: direct expenses	. a b					
		Net income or (loss) from gan						
		Gross sales of inventory, less	•					
	IU a	and allowances	a					
	h	Less: cost of goods sold	a b					
		Net income or (loss) from sale	_					
	<u> </u>	Miscellaneous Revenu		Business Code				<del></del>
	11 2	OTHER INCOME		900099	2,500.	2,500.		
	b				2,500+	2,500.		
	C							<del>                                     </del>
İ	d	All other revenue	<del></del>					
		Total. Add lines 11a-11d		<b>D</b>	2,500.			<del> </del>
l	12	Total revenue. See instructions.		•	460,891.	2,500.	0	. 799.
42200								<u> </u>

Sect	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).									
Check if Schedule O contains a response or note to any line in this Part IX										
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to domestic organizations									
	and domestic governments. See Part IV, line 21									
2	Grants and other assistance to domestic									
	ındividuals See Part IV, line 22		<u> </u>							
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign									
	individuals See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees									
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)									
7	Other salaries and wages									
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)									
9	Other employee benefits									
10	Payroll taxes									
11	Fees for services (non-employees).									
а	Management	134,782.	134,782.							
b	Legal									
С	Accounting .									
d	Lobbying .									
е	Professional fundraising services. See Part IV, line 17									
f	Investment management fees									
g	Other. (If line 11g amount exceeds 10% of line 25,		_							
	column (A) amount, list line 11g expenses on Sch O.)	20,994.	20,875.	119.						
12	Advertising and promotion	42,554.	42,554.							
13	Office expenses .	52,868.	50,690.	2,178.						
14	Information technology	17,439.	17,439.							
15	Royalties .									
16	Occupancy	4.0		··						
17	Travel	13,100.	13,100.							
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings									
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	2 045		2 045						
23	Insurance	2,945.		2,945.	· · · · · · · · · · · · · · · · · · ·					
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)									
	ADMINISTRATVIE FEES	46,307.	25,114.	21,193.						
		38,139.	38,139.							
С	EVENT FOOD AND ENTERTAI	11,572.	11,572.							
d	AWARDS	5,765.	5,765.							
	All other expenses	5,874.	2,797.	3,077.	<del></del>					
<u>25</u>	Total functional expenses. Add lines 1 through 24e	392,339.	362,827.	29,512.	<u> </u>					
26	Joint costs. Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.  Check here  if following SOP 98-2 (ASC 958-720)									
			I .	I						

Form 990 (2014) ARIZONA TECHNOLOGY COUNCIL FOUNDATION 20-1185167 Page 11 **Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 279,019. 342,544. Cash - non-interest-bearing 1 1 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 8,000. 16,175. Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other 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 instr). Complete Part II of Sch L 6 7 Notes and loans receivable, net 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 7,471 basis. Complete Part VI of Schedule D 10a 7,471 0 10b b Less: accumulated depreciation 10c 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 Intangible assets 14 14 Other assets. See Part IV, line 11 15 15 287,019. 358,719 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 7,722. 10,870 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 7,722. 10,870. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 92,903. <u>96,194.</u> Temporarily restricted net assets 186,394. 251,655. 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here

347,849. 358,719. Form 990 (2014)

30

31

32

33

279,297

287,019

31

32

33

and complete lines 30 through 34.

Total net assets or fund balances

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

orm	1990 (2014) ARIZONA TECHNOLOGY COUNCIL FOUNDATION	20-118	5167	Page	12
	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI				ユ
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,891	
2	Total expenses (must equal Part IX, column (A), line 25)	2	392	,339	<del>)</del> .
3	Revenue less expenses. Subtract line 2 from line 1	3	68	,552	<u> </u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	279	,297	1.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities .	6_			_ `
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		C	<u>.</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	347	,849	<del>)</del> .
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				<u>」</u>
				res N	0
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	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	<u>.                                    </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	ζ_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		_
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Audit			
	Act and OMB Circular A-133?		3a	X	<u>.                                    </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		_
			Form 9	<b>90</b> (20	14)

### **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.

▶ Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ARIZONA TECHNOLOGY COUNCIL FOUNDATION

Employer identification number 20-1185167

Pa	rt I	Reason for Public		All organizations must co				<u> </u>	
The o	organi	zation is not a private found						-	
1	<u> </u>	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2	$\overline{}$	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)							
3	一	A hospital or a cooperative		•	ection 170	(b)(1)(A)(ii	i).		
4	Ħ	A medical research organiz	•					the hospital's name.	
•		city, and state.	a op 5. a. o 5	iganionon mini a noopha				,	
5		An organization operated for	or the benefit of a col	llege or university owner	d or operat	ted by a no	overnmental unit describ	ed in	
9		section 170(b)(1)(A)(iv). (C		nogo or anniolony ourne	а с. срота	, u. g.			
6		A federal, state, or local go	· · · · · · · · · · · · · · · · · · ·	nental unit described in	section 17	70/61/41/41	(v)		
_	$\overline{\mathbf{x}}$	An organization that norma	•				` '	nublic described in	
′	تما		•	illiai part of its support	iom a gov	emmentai	unit of from the general	public described in	
0		section 170(b)(1)(A)(vi). (C	•	4VAVui) (Complete Par	+ (I \				
8		A community trust describe	• -			oontributu	ana mambarahin fasa a	nd aross rossints from	
9		An organization that norma	•	•	-			-	
		activities related to its exer							
		income and unrelated business.		(less section 511 tax) if	om busine	sses acqu	ired by the organization	alter Julie 30, 1975.	
40		See section 509(a)(2). (Con An organization organized a	•	walk to toot for outline or	fatu Caa		NO(+)(4)		
10			•	•	•		• • • •	nurnosos of one or	
11		An organization organized	•	•	-				
		more publicly supported or	•	` ` ` `				HECK THE DOX III	
		lines 11a through 11d that				•	_	anuna	
а		Type I. A supporting orga	•	•	-	-			
		the supported organization			a majomy (	or the direc	ctors or trustees or the s	upporting	
		organization. You must o	•		tion with it	a aunnart	ad arganization(a), by ba	una	
b	ـــــا	Type II. A supporting org							
		control or management of			ame perso	nis triat cc	introl of manage the sup	ported	
_		organization(s). You mus	•		ın aannaa	tion with i	and functionally intograte	ad wiith	
С	L	Type III functionally inte			_			a with,	
۰		its supported organizatio		•	•	•	-	ration(a)	
a	L	Type III non-functionally							
		that is not functionally int	-	•	-			veness	
_	Γ	requirement (see instruct  Check this box if the organic	•	•					
е	L	functionally integrated, or					r rype i, rype ii, rype iii		
	Coto	r the number of supported	• •	nally integrated support	ing organia	zation.			
-		ride the following information		d organization(s)				[	
_9		) Name of supported	(ii) EIN	(III) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of	
	•	organization		(described on lines 1-9	listed i	n your	support (see	other support (see	
				above or IRC section (see instructions))	Yes	No	Instructions)	Instructions)	
		<del></del>		(see instructions))					
	<u> </u>								
				<del></del>					
Γota	ıl								

Schedule A (Form 990 or 990-EZ) 2014 ARIZONA TECHNOLOGY COUNCIL FOUNDATION 20-1185167 Page 2

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)

Sec	Section A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total		
	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	255,994.	374,044.	456,779.	412,399.	457,592.	1956808.		
2	Tax revenues levied for the organ-	•	-						
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
_	furnished by a governmental unit to					' ·			
	the organization without charge								
4	Total. Add lines 1 through 3	255,994.	374,044.	456,779.	412,399.	457,592.	1956808.		
	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)						734,956.		
6	Public support. Subtract line 5 from line 4						1221852.		
	ction B. Total Support						1221032.		
	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total		
	Amounts from line 4	255,994.	374,044.	456,779.	412,399.	457,592.	1956808.		
-	Gross income from interest,								
•	dividends, payments received on								
	securities loans, rents, royalties			ı					
	and income from similar sources	9.		78.	723.	799.	1,609.		
9	Net income from unrelated business						-,		
•	activities, whether or not the								
	business is regularly carned on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)		2,686.		45.	2,500.	5,231.		
11	Total support. Add lines 7 through 10						1963648.		
	Gross receipts from related activities,	etc. (see instruction	ons)			12			
	First five years. If the Form 990 is for	•	•	d. fourth, or fifth ta	ıx vear as a sectio				
	organization, check this box and stor	here		•	,				
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				•		
14	Public support percentage for 2014 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	62.22 %		
15	Public support percentage from 2013	Schedule A, Part	II, line 14			15	68.54 %		
16a	33 1/3% support test - 2014. If the o	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m	nore, check this bo			
	stop here. The organization qualifies	as a publicly supp	orted organization				$\triangleright \mathbf{X}$		
b	33 1/3% support test - 2013. If the c	organization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box		
	and stop here. The organization qual	rfies as a publicly s	supported organiza	ation			. ▶□		
17a	10% -facts-and-circumstances tes	t - <b>2014.</b> If the org	anızatıon dıd not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,		
	and if the organization meets the "fac								
	meets the "facts-and-circumstances"			•	•	ŭ	ightharpoons		
b	10% -facts-and-circumstances tes	t - 2013. If the orga	anization did not d	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or		
	more, and if the organization meets th								
	organization meets the "facts-and-circ						ightharpoons		
18	Private foundation. If the organization				· · · · · -		<b></b> ▶□		
					0.1.	- 1 (- A (F 000	000 571 0011		

432023 09-17-14

# Schedule A (Form 990 or 990-EZ) 2014 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)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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 bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to			İ			
or expended on its behalf					1	
5 The value of services or facilities						
furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5				·		
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons					<u>                                      </u>	
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						
8 Public support (Subtract line 7c from line 6)			:			
Section B. Total Support						
alendar year (or fiscal year beginning in) ► 🛭	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
Oa Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
I1 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
2 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12)		<u> </u>		<u> </u>	L	
14 First five years. If the Form 990 is for	the organization'	s first, second, thii	d, fourth, or fifth to	ax year as a sectio	on 501(c)(3) organiz	ation,
check this box and stop here		<u>-</u>			······	
ection C. Computation of Publi					<del> </del>	
5 Public support percentage for 2014 (lii	•	•	column (f))		15	
6 Public support percentage from 2013					16	
ection D. Computation of Inves						
7 Investment income percentage for 20	· ·	•	ne 13, column (f))	•	17	
8 Investment income percentage from 2					18	
19a 33 1/3% support tests - 2014. If the	_					7 is not
more than 33 1/3%, check this box and b 33 1/3% support tests - 2013. If the						<b>▶</b> ∟ and
line 18 is not more than 33 1/3%, ched	ck this box and s	top here. The orga	anization qualifies	as a publicly supp	orted organization	▶□
20 Private foundation If the organization	did not check a	hoy on line 14, 10	a or 10h chack th	hie hay and can in	etnictione	

### Schedule A (Form 990 or 990-EZ) 2014 ARIZONA TECHNOLOGY COUNCIL FOUNDATION

Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A. D. and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

	Sections A, D	, and E. II	you checked in	J UI Fait i, t
Section A	A. All Suppo	rting O	rganizations	

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
  (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
_		
2		
3a		<del></del>
3b		
3c		
4a		
41		
4b		
4c		
	:	
5a		
5b		
5c		
6		
7		
8		
	•	
9a		
9b_		
9c		
10a		
10b		

	dule A (Form 990 or 990 EZ) 2014 ARIZONA TECHNOLOGY COUNCIL FOUNDATION 20-11	8516	7 Pa	age <b>5</b>
Pa	rt IV Supporting Organizations (continued)		1	·
	The discussion of the effect of the following assertion of the following assertion		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			l
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	44-		
	below, the governing body of a supported organization?	11a	<del> </del> -	<del> </del>
	A family member of a person described in (a) above?	11b		<del>                                     </del>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	ļ	
Sec	tion B. Type I Supporting Organizations		Yes	No
	Did the directors, thistoge, or membership of one or more supported organizations have the power to		165	NO
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		1	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		<del>                                     </del>
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	ļ		ĺ
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,	_		
<u></u>	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			1
	or management of the supporting organization was vested in the same persons that controlled or managed			1
<u></u>	the supported organization(s)	1_1_	ئــــــل	<u> </u>
Sec	tion D. Type III Supporting Organizations			
	Details the second of the seco		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the	۱ .		
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	<del> </del>	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			l
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	_		
_	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	_		
<u></u>	supported organizations played in this regard.	3_		
	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions):			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	4		
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		-	ŀ
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a	<del> </del>	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			l
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			1
	reasons for the organization's position that its supported organization(s) would have engaged in these			1
_	activities but for the organization's involvement.	2b		<del>                                     </del>
3	Parent of Supported Organizations. Answer (a) and (b) below.			1
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	_		1
	trustees of each of the supported organizations? Provide details in Part VI.	3a	<u> </u>	├
b				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	L	Щ.

	dule A (Form 990 or 990 EZ) 2014 ARIZONA TECHNOLOGY COUN			<u> 20-1185167 Page 6</u>
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	_		uctions. All
	other Type III non-functionally integrated supporting organizations must co	omplete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	ion B - Minimum Asset Amount	, ,	(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see		· · · · · · · · · · · · · · · · · · ·	
	instructions for short tax year or assets held for part of year).	ľ		
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c	<del></del>	
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other	1		
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,	1		
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	lv-integra	ted Type III supporting org	anization (see

Schedule A (Form 990 or 990-EZ) 2014

instructions).

Sche <b>Pa</b> ı	dule A (Form 990 or 990-EZ) 2014 ARIZONA TECHN			0-1185167 Page 7
	Type III tell and	(a)(s) Supporting Orga	arrizations (continued)	Current Year
	on D - Distributions		Current Year	
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemply organizations, in excess of income from activity	or purposes or supported		
_	Administrative expenses paid to accomplish exempt purpose	ne of supported organization		
3_	Amounts paid to acquire exempt use assets	es of supported organization	10	
4	Qualified set-aside amounts (prior IRS approval required)			
<u>5</u> 6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	he organization is responsive	<u> </u>	
0	(provide details in <b>Part VI</b> ). See instructions.	ne organization is responsive	•	
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
10	Elifo o allicant divided by Elifo o allicant	(i)	(ii)	(iii)
		Excess Distributions	Underdistributions	Distributable
Secti	on E - Distribution Allocations (see instructions)	Exocoo Biod ibations	Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7.11104111111111111111111111111111111111
2	Underdistributions, if any, for years prior to 2014			_
_	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014.			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7· \$			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
8_	Breakdown of line 7:			
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Schedule A (Form 990 or 990-EZ) 2014

Dart VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12							
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	Also complete this part for any additional information (See instructions)							
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## **SCHEDULE D**

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

ARIZONA TECHNOLOGY COUNCIL FOUNDATION

**Employer identification number** 20-1185167

organization answered "Yes" to Form 990, Part IV, Ine 6.  (a) Donor advised funds (b) Funds and other accounts  Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of contributions to (during year) 4 Aggregate value of grants from (during year) 5 Did the organization in property, subject to the organization's exclusive legal control?  Did the organization in grants and office and office office of the organization's exclusive legal control?  Did the organization inform all disprates, donors, and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Did the organization inform all grantses, donors, and donor advisor, or for any other purpose conferring impermisable private benefit of the donor or donor advisor, or for any other purpose conferring impermisable private benefit of the donor or donor advisor, or for any other purpose conferring impermisable private benefit of the donor or donor advisor, or for any other purpose conferring impermisable private benefit of the donor or donor advisor, or for any other purpose conferring impermisable private benefit of the organization (check all that apply).  Part III   Conservation Essements S. Complete of the organization on assessment or a control or a conservation of a historically important land area   Preservation of land for public use (e.g., eccreation or education)   Preservation of a certified historic structure   Preservation of a certified historic structure   Preservation of a certified historic structure   Preservation of a certified historic structure   Preservation of a certified historic structure   Preservation of a certified historic structure   Preservation of a certified historic structure   Preservation of a certified historic structure   Preservation of a certified historic structure   Preservation of a certified historic structure   Preservation of a certified historic structure   Preservation   Pre	Pai	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the						
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d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶  Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶  Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)  and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these terms.  b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following	c	•	ucture included in (a)					
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a Revenue included in Form 990, Part VIII, line 1				, p. 51160				
	а	,		<b>▶</b> \$				
		Assets included in Form 990, Part X	•	• • • • • • • • • • • • • • • • • • •				

		TECHNOLOG								Page 2	
Pai	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures, e	or Othe	<u>r Simil</u>	<u>ar Asse</u>	<b>ts</b> (contint	Jed)	
3	Using the organization's acquisition, access	ion, and other record	is, chec	k any of the	following tha	at are a sig	gnificant	use of its	collection	items	
	(check all that apply);		_								
а	Public exhibition	C			change progra						
ь	Scholarly research	e	, []	Other							
С	Preservation for future generations										
4	Provide a description of the organization's c	ollections and explai	n how t	hey further t	the organizati	on's exem	npt purpo	ose in Par	t XIII.		
5	During the year, did the organization solicit of					er sımılar	assets		_		
_	to be sold to raise funds rather than to be maintained as part of the organization's collection?										
Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or										
	reported an amount on Form 990, Pa									<del></del>	
1a	Is the organization an agent, trustee, custod	lian or other intermed	diary for	contributio	ns or other as	ssets not i	ncluded	_	٦	<u></u>	
	on Form 990, Part X?							L	」Yes	∟ No	
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table.							
									Amount		
	Beginning balance	• •					1c				
	Additions during the year						1d				
	Distributions during the year	-					1e				
f	Ending balance	form 000 Bort V line	. 21 for		todial acce	Sunt linbili	1f		Yes		
	Did the organization include an amount on F If "Yes," explain the arrangement in Part XIII						ıy r	. ∟	」 res	∐ No	
Par		<del></del>		<del></del>	····		)			<u> </u>	
<u> </u>		(a) Current year		nor year	(c) Two year			ears back	(e) Four	vears back	
1a	Beginning of year balance	(a) Current year	(0)	noi year	(C) 1 WO YOU	13 Dack	uj mico y	rear 3 back	(e) rour	rears back	
b	Contributions				<b></b>						
c	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities										
•	and programs										
f	Administrative expenses										
9	End of year balance										
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1	lg, column (	a)) held as	•					
а	Board designated or quasi-endowment		_%								
b	Permanent endowment >	%									
С	Temporarily restricted endowment ▶	%									
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%.									
За	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	and administe	ered for th	e organiz	ation	_		
	by:								!	Yes No	
	(i) unrelated organizations								3a(i)		
	(ii) related organizations			•					3a(ii)		
b	If "Yes" to 3a(ii), are the related organization:	•		•					3b		
4	Describe in Part XIII the intended uses of the		<u>wment</u>	funds.							
Par	t VI Land, Buildings, and Equipn			=							
	Complete if the organization answere			1							
	Description of property	(a) Cost or o		1 ''	t or other		cumulate	ed	(d) Book	value	
	1	basis (investr	nent)	Dasis	(other)	аер	reciation	-			
	Land					<del></del> _					
b	Buildings			<del> </del>			<u>.                                    </u>				
C	Leasehold improvements			-	7,471.		7,4	71			
	Equipment .	<del></del>		<del> </del>	/ , <del>4</del> / 1 •		1,4	<del>/                                    </del>		0.	
	Other  Add lines 1a through 1e (Column (d) must e	equal Form 990 Port	X colu	mn (R) line	1001					0.	
· · · · · al		radio on or or or or all	-,	10), mid				_		∙ .	

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014

		(Form 990) 2014		TECHNOLOGY				167 Page <b>4</b>
Parl	t XI	Reconciliation of	f Revenue pe	r Audited Financ	ial Stateme	nts With Revenue	per Return.	
		Complete if the organ	zation answered	"Yes" to Form 990, Pa	art IV, line 12a.			
1	Total·r	evenue, gains, and oth	er support per au	udited financial statem	ents .		1	
2	Amou	nts included on line 1 b	out not on Form 9	90, Part VIII, line 12.		1 1		
а	Net ur	nrealized gains (losses)	on investments			2a		
b	Donate	ed services and use of	facilities			2b		
С	Recov	eries of prior year gran	ts .			2c		
		(Describe in Part XIII.)				2d		
		nes 2a through 2d					2e	
		act line 2e from line 1					3	
		nts included on Form 9				1 1		
		ment expenses not inc	luded on Form 99	90, Part VIII, line 7b		4a		
		(Describe in Part XIII.)				4b	<del> </del>	
_		nes 4a and 4b		45 000 5 44			4c	
		Peconciliation of				ents With Expenses	5   S por Poturn	
ran	LAII	,	•			ants with Expense:	s per neturn.	
	T-4-1	Complete if the organi	***	· · · · · · · · · · · · · · · · · · ·	art iv, line iza		<del></del>	
		expenses and losses pe					1	<u>.</u> _
		nts included on line 1 b ed services and use of		90, Part IX, line 25:		00		
			raciilles			2a		
		ear adjustments			•	2b		
-	Other					2c	<del> </del>	
		(Describe in Part XIII)				2d		
		nes 2a through 2d					2e	
		act line <b>2e</b> from line <b>1</b>	OO Dort IV line O	E but not on line 1			3	
		nts included on Form 9				1 45		
		ment expenses not inc	iuded on Form 9:	30, Part VIII, line 75		4a		
		(Describe in Part XIII)				4b		
		nes 4a and 4b		toqual Farm 000 Dan	t   /mo 10 )		4c	
5 Parl	YIII	expenses. Add lines 3 a Supplemental In	formation	t equal Form 990, Pan	(I, line 18)		5	
		4b; and Part XII, lines				V, lines 1b and 2b, Part \ tional information.	v, iiile 4, Fait A, iiile	2, Fall AI,
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### **SCHEDULE J** (Form 990)

Part I

Compensation Information

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

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule J (Form 990) and its instructions is at www.lrs.gov/form990.

ARIZONA TECHNOLOGY COUNCIL

**Employer identification number** 20-1185167

**Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors. trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Independent compensation consultant Compensation survey or study Form 990 of other organizations X Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? 4a X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? 5a X b Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of. a The organization? 6a b Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Х 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III X R If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule J (Form 990) 2014

20-1185167

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Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. ARIZONA TECHNOLOGY COUNCIL FOUNDATION Schedule J (Form 990) 2014

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

Note. The sum of columns (B)(i)-(ii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	<u> </u>	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits		ın column (B) reported as deferred in prior Form 990
(1) STEVEN ZYLSTRA	Ξ	0	0	0	0	0	0	0
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Schedule J (Form 990) 2014

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### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

ARIZONA TECHNOLOGY COUNCIL FOUNDATION

**Employer identification number** 20-1185167

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TECHNOLOGY IN ARIZONA THROUGH THE RAISING OF FUNDS, LEADERSHIP,
COLLABORATION, AND INNOVATION.
FORM 990, PART VI, SECTION B, LINE 11:
A COPY OF THE FORM 990 IS PROVIDED TO THE GOVERNING BODY AND REVIEWED BY
THE PRESIDENT/CEO AND BOARD TREASURER. ONCE ALL QUESTIONS, IF ANY, ARE
RESOLVED AND THE FORM 990 IS ACCEPTED, THE TAX PREPARER IS NOTIFIED TO
FINALIZE AND FILE THE TAX RETURN.
FORM 990, PART VI, SECTION B, LINE 12C:
ANNUALLY, THE OFFICERS AND DIRECTORS/TRUSTEES ARE REQUIRED TO DISCLOSE ANY
CONFLICTS OR ADVISE THERE ARE NONE.
FORM 990, PART VI, SECTION C, LINE 19:
GOVERNING DOCUMENTS ARE IN THE ORGANIZATION'S BYLAWS AND ARE AVAILABLE TO
THE PUBLIC UPON REQUEST.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

2014

OMB No 1545-0047

▶Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number 20-1185167 Open to Public Inspection

> Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. ARIZONA TECHNOLOGY COUNCIL FOUNDATION Name of the organization Part I

Direct controlling entity End-of-year assets <u>e</u> Total income 9 Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Part II

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SEE PART VII FOR CONTINUATIONS

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Schedule R (Form 990) 2014

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Schedule R (Form 990) 2014 ARIZONA TECHNOLOGY COUNCIL FOUNDATION

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year Part III

(j) (k) General or Percentage managng partner? Yes No			
General or Finanaging partner?		-	
Code V-UBI camount in box moount in box camount in K-1 (Form 1065)			
(h) Disproportionate allocations?			
(g) Share of end-of-year assets			
(f) Share of total income			
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)			
(d) Direct controlling entity			
(c) Legal domicile (state or foreign country)			
(b) Primary activity			
(a) Name, address, and EIN of related organization			

Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

Primary activity Legal domicile Direct controlling Transfer entity (C.
country)

Schedule R (Form 990) 2014

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Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule						Yes	Š
1 Dunng the tax year, did the organization engage in any of the following transaction	s with one or more rel	transactions with one or more related organizations listed in Parts II-IV?	Parts II-IV?			$\vdash$	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		;	. ::	:	<u>ra</u>		×
b Gift, grant, or capital contribution to related organization(s)			•	:	<del>p</del>		×
c Gift, grant, or capital contribution from related organization(s)	:				2		×
d Loans or loan guarantees to or for related organization(s)					19		×
e Loans or loan guarantees by related organization(s)					9		×
					;		
f Dividends from related organization(s)					<b>+</b>		×
g Sale of assets to related organization(s)					19		×
h Purchase of assets from related organization(s)		٠			4		×
i Exchange of assets with related organization(s)					1i		×
j Lease of facilities, equipment, or other assets to related organization(s)					<b>1</b>		×
k Lease of facilities, equipment, or other assets from related organization(s)					<b>*</b>		×
1 Performance of services or membership or fundraising solicitations for related organization(s)	ınızatıon(s)				=		×
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			;	Ē		×
n Sharng of facilities, equipment, mailing lists, or other assets with related organization(s)	s)uo			1	1-	×	
o Sharing of paid employees with related organization(s)					9	×	
p Reimbursement paid to related organization(s) for expenses				•	5	×	
<b>q</b> Reimbursement paid by related organization(s) for expenses.			::	:	19		×
<ul> <li>Other transfer of cash or property to related organization(s)</li> </ul>		:			+		×
s Other transfer of cash or property from related organization(s)		•			1s		×
2 if the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	no must complete the	s line, including covered re	lationships and transaction thres	holds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	g amount invo	olved		
(1)							
(2)							!
10)							
(6)							
(4)							-
(5)							
(6)							
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Schedule R (Form 990) 2014 ARIZONA TECHNOLOGY COUNCIL FOUNDATION

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(q)	(2)	( <del>p</del> )	(e)	Θ	(6)	3	(3)	9	\$
Name, address, and EIN of entity	ctivity	Legal domicile (state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs?	Share of total income	Share of end-of-year assets	Dispropor- tionate allocations?	UBI box 20 lle K-1 065)	General or managing partner?	Percentage ownership
		:								
									_	
	•									

Schedule R (Form 990) 2014

Part VII Supplemental Information  Provide additional information for responses to questions on Schedule R (see instructions)
PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:
NAME OF RELATED ORGANIZATION:
ARIZONA TECHNOLOGY COUNCIL
PRIMARY ACTIVITY: CONNECT, REPRESENT, AND SUPPORT ARIZONA'S EXPANDING
TECHNOLOGY INDUSTRY