

Form **990-EZ**
 Department of the Treasury
 Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
 (except black lung benefit trust or private foundation)
 Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.
 The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150
2009
Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 01-01-2009, and ending 12-31-2009

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization ASC Inc DBA AUSTIN TECHNOLOGY COUNCIL	D Employer identification number 74-2871930
		Number and street (or P O box, if mail is not delivered to street address) Room/suite 3925 W Braker Lane No 400	E Telephone number (512) 305-0023
		City or town, state or country, and ZIP + 4 Austin, TX 78759	F Group Exemption Number

G Accounting method: Cash Accrual
 Other (specify):

I Website: WWW.AUSTINTECHNOLOGYCOUNCIL.ORG
H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

J Tax-Exempt status (check only one) — 501(c)(6) (Insert no) 4947(a)(1) or 527
K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.
L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ. \$ 264,719

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	101,774
	2 Program service revenue including government fees and contracts	2	43,164
	3 Membership dues and assessments	3	90,713
	4 Investment income	4	143
	5a Gross amount from sale of assets other than inventory	5a	
	b Less cost or other basis and sales expenses	5b	
	5c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	a Gross revenue (not including \$ of contributions reported on line 1)	6a	28,925
b Less direct expenses other than fundraising expenses	6b	18,881	
6c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	10,044	
7a Gross sales of inventory, less returns and allowances	7a		
b Less cost of goods sold	7b		
7c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8 Other revenue (describe)	8		
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	245,838	
Expenses	10 Grants and similar amounts paid (attach schedule)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	124,830
	13 Professional fees and other payments to independent contractors	13	70,479
	14 Occupancy, rent, utilities, and maintenance	14	12,896
	15 Printing, publications, postage, and shipping	15	652
	16 Other expenses (describe)	16	95,629
17 Total expenses. Add lines 10 through 16	17	304,486	
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-58,648
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	87,328
	20 Other changes in net assets or fund balances (attach explanation)	20	5,750
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	34,430

Part II Balance Sheets—If total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	58,712	22 27,695
23 Land and buildings		23
24 Other assets (describe)	90,181	24 51,132
25 Total assets	148,893	25 78,827
26 Total liabilities (describe)	61,565	26 44,397
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	87,328	27 34,430

Part V Other Information (Note the statement requirements in the instructions for Part V.)

Yes No

<p>33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity</p>	<p>33</p>		<p>No</p>
<p>34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes</p>	<p>34</p>		<p>No</p>
<p>35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T</p>			
<p>a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033 (e) notice, reporting, and proxy tax requirements?</p>	<p>35a</p>		<p>No</p>
<p>b If "Yes," has it filed a tax return on Form 990-T for this year?</p>	<p>35b</p>		
<p>36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N</p>	<p>36</p>		<p>No</p>
<p>37a Enter amount of political expenditures, direct or indirect, as described in the instructions <input type="checkbox"/> _____ 37a _____ 0</p>			
<p>b Did the organization file Form 1120-POL for this year?</p>	<p>37b</p>		
<p>38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?</p>	<p>38a</p>		<p>No</p>
<p>b If "Yes," complete Schedule L, Part II and enter the total amount involved</p>	<p>38b</p>		
<p>39 <i>Section 501(c)(7) organizations.</i> Enter</p>			
<p>a Initiation fees and capital contributions included on line 9</p>	<p>39a</p>		
<p>b Gross receipts, included on line 9, for public use of club facilities</p>	<p>39b</p>		
<p>40a <i>Section 501(c)(3) organizations.</i> Enter amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> _____, section 4912 <input type="checkbox"/> _____, section 4955 <input type="checkbox"/> _____</p>			
<p>b <i>Section 501(c)(3) and 501(c)(4) organizations.</i> Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I</p>	<p>40b</p>		
<p>c <i>Section 501(c)(3) and 501(c)(4) organizations</i> Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . <input type="checkbox"/> _____</p>			
<p>d <i>Section 501(c)(3) and 501(c)(4) organizations</i> Enter amount of tax on line 40c reimbursed by the organization <input type="checkbox"/> _____</p>			
<p>e <i>All organizations.</i> At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T</p>	<p>40e</p>		<p>No</p>
<p>41 List the states with which a copy of this return is filed <input type="checkbox"/> _____</p>			
<p>42a The organization's books are in care of <input type="checkbox"/> <u>AMY SEGAL</u> Telephone no <input type="checkbox"/> <u>(512) 305-0023</u> 3925 W Braker Lane No 400 Located at <input type="checkbox"/> <u>Austin, TX</u> ZIP + 4 <input type="checkbox"/> <u>78759</u></p>			
<p>b At any time during the calendar year, 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)?</p>	<p>42b</p>	<p>Yes No</p>	<p>No</p>
<p>If "Yes," enter the name of the foreign country <input type="checkbox"/> _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</p>			
<p>c At any time during the calendar year, did the organization maintain an office outside of the U S ?</p>	<p>42c</p>		<p>No</p>
<p>If "Yes," enter the name of the foreign country <input type="checkbox"/> _____</p>			
<p>43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here <input type="checkbox"/> _____ and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> 43 _____</p>	<p>43</p>		
<p>44 Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of Form 990-EZ.</p>	<p>44</p>	<p>Yes No</p>	<p>No</p>
<p>45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes", Form 990 must be completed instead of Form 990-EZ.</p>	<p>45</p>		<p>No</p>

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.

All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		
48 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		
49a Did the organization make any transfers to an exempt non-charitable related organization?		
49b If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

50(f) Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

51(d) Total number of other independent contractors each receiving over \$100,000

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer: ***** Date: 2010-10-11

Type or print name and title: JULIE HULS, President

Paid Preparer's Use Only

Preparer's signature: Maxwell Locke Ritter LLP Date: _____

Check if self-employed:

Preparer's identifying number (See instructions): _____

Firm's name (or yours if self-employed), address, and ZIP + 4: Maxwell Locke & Ritter LLP, 401 Congress Avenue Suite 1100, Austin, TX 787019682

EIN: _____

Phone no: (512) 370-3200

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		GOLF TOURNAMENT (event type)	(event type)	(total number)	(Add col (a) through col (c))
Revenue	1 Gross receipts	28,925			28,925
	2 Less Charitable contributions				
	3 Gross income (line 1 minus line 2)	28,925			28,925
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	18,881			18,881
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				18,881
11 Net income summary Combine lines 3, column d, and line 10. ▶				10,044	

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
Direct Expenses	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
Direct Expenses	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
8 Net gaming income summary Combine lines 1, column d, and line 7 ▶					

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities _____		
a Is the organization licensed to operate gaming activities in each of these states?	9a	
b If "No," Explain _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If "Yes," Explain _____		
11 Does the organization operate gaming activities with nonmembers?	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

		Yes	No
13 Indicate the percentage of gaming activity operated in			
a The organization's facility	13a		
b An outside facility	13b		
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records			
Name ▶ _____			
Address ▶ _____			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a	
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____			
c If "Yes," enter name and address			
Name ▶ _____			
Address ▶ _____			
16 Gaming manager information			
Name ▶ _____			
Gaming manager compensation ▶ \$ _____			
Description of services provided ▶ _____			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
17 Mandatory distributions			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		17a	
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____			

TY 2009 Other Assets Schedule

Name: ASC Inc DBA AUSTIN TECHNOLOGY COUNCIL

EIN: 74-2871930

Description	Beginning of Year Amount	End of Year Amount
Accounts Receivable	82,829	46,065
Prepaid Expenses	3,720	2,332
Other Depreciable Assets	3,632	2,735

TY 2009 Other Changes in Net Assets Schedule

Name: ASC Inc DBA AUSTIN TECHNOLOGY COUNCIL

EIN: 74-2871930

Description	Amount
PRIOR PERIOD ADJUSTMENT	5,750

TY 2009 Other Expenses Schedule

Name: ASC Inc DBA AUSTIN TECHNOLOGY COUNCIL

EIN: 74-2871930

Description	Amount
events	26,836
Bad debt Expense	24,500
INFORMATION TECHNOLOGY	14,165
Taxes	10,617
OFFICE EXPENSES	8,417
Miscellaneous Expense	4,827
Insurance	2,627
Travel	768
meals and entertainment	2,872

TY 2009 Other Liabilities Schedule

Name: ASC Inc DBA AUSTIN TECHNOLOGY COUNCIL

EIN: 74-2871930

Description	Beginning of Year Amount	End of Year Amount
Accounts Payable & Accrued Expenses	11,290	7,832
ATC Membership	50,275	36,565

**TY 2009 Transfers Personal Benefits
Contracts Declaration**

Name: ASC Inc DBA AUSTIN TECHNOLOGY COUNCIL

EIN: 74-2871930

Declaration: The organization did not, during the year, receive any funds, directly, or indirectly, to pay premiums on a personal benefit contract. The organization, did not, during the year, pay any premiums, directly, or indirectly, on a personal benefit contract.

Additional Data

Software ID:
Software Version:
EIN: 74-2871930
Name: ASC Inc DBA AUSTIN TECHNOLOGY COUNCIL

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
ARJUNA SANGA C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	ADVISORY BOARD MEMBER 2 00	0	0	0
DAVID ANDERSON C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	ADVISORY BOARD MEMBER 1 00	0	0	0
TED HEYDINGER C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	ADVISORY BOARD MEMBER 1 00	0	0	0
ISAAC BARCHAS C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	AWA LIASON 2 00	0	0	0
BRIAN WONG C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	BOARD CHAIR 2 00	0	0	0
HARVEY FRYE C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	BOARD MEMBER 2 00	0	0	0
JACK MCDONALD C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	BOARD MEMBER 1 00	0	0	0
SAM COURSEN C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	BOARD MEMBER 2 00	0	0	0
TIM HAYDEN C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	BOARD MEMBER 2 00	0	0	0
WILLIAM LEAKE C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	BOARD MEMBER 2 00	0	0	0
ANDY MEADOWS c/O ASC INC 3925 W BRAKER LANE S aUSTIN, TX 78759	BOARD MEMBER 2 00	0	0	0
ERIN DEFOSSEE C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	EMERITUS ATC BOARD MEMBER 2 00	0	0	0
HARVEY RING C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	EMERITUS ATC BOARD MEMBER 1 00	0	0	0
JIMMY TREYBIG C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	EMERITUS ATC BOARD MEMBER 1 00	0	0	0
MARK MELLIAR-SMITH C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	EMERITUS ATC BOARD MEMBER 1 00	0	0	0
MICHAEL CATION C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	EMERITUS ATC BOARD MEMBER 1 00	0	0	0
MITCHELL MCGOVERN C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	EMERITUS ATC BOARD MEMBER 2 00	0	0	0
PIKE POWERS C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	EMERITUS ATC BOARD MEMBER 1 00	0	0	0
ROBIN CURLE C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	EMERITUS ATC BOARD MEMBER 1 00	0	0	0
TOM SICOLA C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	EMERITUS ATC BOARD MEMBER 1 00	0	0	0
WILL WYNN C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	EMERITUS ATC BOARD MEMBER 1 00	0	0	0
DAN CUNNINGHAM C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	MEMBERSHIP CHAIR 2 00	0	0	0
DAN SULLIVAN C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	PAST BOARD CHAIR 2 00	0	0	0
ALISHA RING C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	PRESIDENT 50 00	47,692	3,919	0
HULS JULIE C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	PRESIDENT 50 00	13,231	0	0
MICHAEL BARRETT C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	SECRETARY 2 00	0	0	0
BOB SMITH C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	TREASURER 1 00	0	0	0
COREY BLAHUTA C/O ASC INC 3925 W BRAKER LANE S AUSTIN, TX 78759	TREASURER 2 00	0	0	0