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

Short Form
Return of Organization Exempt From Income Tax

OMB No 1545-1150
2009
Open to Public Inspection

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.

A For the 2009 calendar year, or tax year beginning 07-01-2009, and ending 06-30-2010

- B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization
SOFTWARE INFORMATION AND TECHNOLOGY ASSOCIATION OF KANSAS INC
Number and street (or P O box, if mail is not delivered to street address) Room/suite
8527 BLUEJACKET ST
City or town, state or country, and ZIP + 4
LENEXA, KS 66214

D Employer identification number
26-2852304
E Telephone number
(913) 894-1394
F Group Exemption Number

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).
G Accounting method Cash Accrual
Other (specify) _____

I Website: NA
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 \$ 150,338

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 93,500
2 Program service revenue including government fees and contracts	2 3,338
3 Membership dues and assessments	3 53,500
4 Investment income	4
5a Gross amount from sale of assets other than inventory	5a
b Less cost or other basis and sales expenses	5b 0
c 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 0
b Less direct expenses other than fundraising expenses	6b 0
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c 0
7a Gross sales of inventory, less returns and allowances	7a
b Less cost of goods sold	7b 0
c 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	9 150,338

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 93,992
13 Professional fees and other payments to independent contractors	13 11,486
14 Occupancy, rent, utilities, and maintenance	14 6,030
15 Printing, publications, postage, and shipping	15 741
16 Other expenses (describe _____)	16 35,775
17 Total expenses. Add lines 10 through 16	17 148,024

Net Assets	
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 2,314
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 58,821
20 Other changes in net assets or fund balances (attach explanation)	20
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21 61,135

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	56,995	22 68,533
23 Land and buildings		23
24 Other assets (describe _____)	3,265	24 10,161
25 Total assets	60,260	25 78,694
26 Total liabilities (describe _____)	1,439	26 17,559
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	58,821	27 61,135

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

		Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		No
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		No
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			
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?	35a		No
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
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	36		No
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶	37a		
b Did the organization file Form 1120-POL for this year?	37b		No
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?	38a		No
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b		
39 <i>Section 501(c)(7) organizations.</i> Enter			
a Initiation fees and capital contributions included on line 9	39a	0	
b Gross receipts, included on line 9, for public use of club facilities	39b	0	
40a <i>Section 501(c)(3) organizations.</i> Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____			
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	40b		
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 ▶ _____			
d <i>Section 501(c)(3) and 501(c)(4) organizations</i> Enter amount of tax on line 40c reimbursed by the organization ▶ _____			
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	40e		No
41 List the states with which a copy of this return is filed ▶ <u>KS</u>			
42a The organization's books are in care of ▶ <u>LIREL HOLT</u> Telephone no ▶ <u>(913) 438-2282</u> 8527 BLUEJACKET ST Located at ▶ <u>LENEXA, KS</u> ZIP + 4 ▶ <u>66214</u>			
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)? If "Yes," enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	42b	Yes	No
c At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country ▶ _____	42c		No
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 ▶ 43			
44 Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of Form 990-EZ.	44	Yes	No
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.	45		No

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
NONE				

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
NONE		

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: 2010-11-02

Type or print name and title: Lurel Holt, Chairman

Paid Preparer's Use Only

Preparer's signature: CHRISTOPHER S KOHART Date: _____ Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: Kohart Accounting PA, 901 Kentucky Suite 306, Lawrence, KS 66044

Preparer's identifying number (See instructions): _____

EIN: _____

Phone no: (785) 856-2882

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

TY 2009 Other Expenses Schedule

Name: SOFTWARE INFORMATION AND TECHNOLOGY
ASSOCIATION OF KANSAS INC

EIN: 26-2852304

Software ID: 09000047

Software Version: 2009v1.3

Description	Amount
Travel	2,343
TELEPHONE	2,762
SUPPLIES	1,147
Office Expenses	855
	3,351
Depreciation	191
CONTRACT LABOR	13,505
Conferences, Conventions, and Meetings	4,448
BANK FEES	826
AMERICAN CANCER SOCIETY	100
Advertising and Promotion	4,460

Additional Data**Software ID:****Software Version:****EIN:** 26-2852304**Name:** SOFTWARE INFORMATION AND TECHNOLOGY
ASSOCIATION OF KANSAS INC**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
Julia Lynn 8527 Bluejacket Street Lenexa, KS 66214	Executive Direc 40 00	32,632		
Miriam Ubben 8527 Bluejacket Street Lenexa, KS 66214	Fmr Exec Dir 40 00	61,360	8,280	
Rob Herrington 10 East Ninth St Ste G Lawrence, KS 66044	Boardmember 0	0		
Wayne Morgan 3500 W 75th St Ste 350 Prairie Village, KS 66208	Boardmember 0	0		
Joseph Evans 2335 Irving Hill Road Lawrence, KS 66045	Boardmember 0	0		
Trish Brasted 7829 E Rockhill Rd 307 Wichita, KS 67206	Boardmember 0	0		
Ann Martin 3718 N Rock Road Wichita, KS 67226	Boardmember 0	0		
Michelle Weigand 214 SW 6th Topeka, KS 66603	Boardmember 0	0		
Virgil Wallentine 234 Nichols Hall Manhattan, KS 66506	Boardmember 0	0		
Ravi Pendse 109 Morrison Hall Wichita, KS 67260	Boardmember 0	0		
John Repko PO Box 40331 Overland Park, KS 66204	Boardmember 0	0		
Joel Wiggins 8527 Bluejacket St Lenexa, KS 66214	Boardmember 0	0		
Scott Coons 22701 W 68th Terrace Shawnee, KS 66226	Boardmember 0	0		
Clint Batman 1617 St Andrews Dr Ste 201 Lawrence, KS 66047	Boardmember 0	0		
Toby Rush 8527 Bluejacket St Lenexa, KS 66214	Boardmember 0	0		
Randy Roebuck 301 S Grove Wichita, KS 67211	Boardmember 0	0		
Laurie Minard 1200 E 151st St Olathe, KS 66062	Boardmember 0	0		
Lirel Holt 16200 Foster St Overland Park, KS 66085	Chairman 0	0		
Perry Puccetti 6330 Lamar Ste 230 Overland Park, KS 66202	Vice Chairman 0	0		
Neal Sharma 10808 Mastin St 130 Overland Park, KS 66210	Secretary 0	0		
Joel Keller 125 N Emporia Suite 100 Wichita, KS 67202	Boardmember 0	0		

TY 2009 Other Assets Schedule

Name: SOFTWARE INFORMATION AND TECHNOLOGY
ASSOCIATION OF KANSAS INC

EIN: 26-2852304

Software ID: 09000047

Software Version: 2009v1.3

Description	Beginning of Year Amount	End of Year Amount
Prepaid Expenses and Deferred Charges	1,290	7,217
Machinery and Equipment		1,444
Accounts Receivable	1,975	1,500

TY 2009 Other Liabilities Schedule

Name: SOFTWARE INFORMATION AND TECHNOLOGY
ASSOCIATION OF KANSAS INC

EIN: 26-2852304

Software ID: 09000047

Software Version: 2009v1.3

Description	Beginning of Year Amount	End of Year Amount
Deferred Revenue		11,890
Accounts Payable and Accrued Expenses	1,439	5,669