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Form 990-EZ

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, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions) All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 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

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2010 calendar year, or tax year beginning 07-01-2010, and ending 06-30-2011

- 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 Street. 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

G Accounting method: Accrual. I Website: N/A. J Tax-Exempt status: 501(c)(3)

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. Total: \$106,169

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

Check if the organization used Schedule O to respond to any question in this Part I

Table with 21 rows and 2 columns. Rows 1-9: Revenue (Total: 106,169). Rows 10-17: Expenses (Total: 118,695). Rows 18-21: Net Assets (Total: 48,609).

Part II Balance Sheets

Check if the organization used Schedule O to respond to any question in this Part II

(See the instructions for Part II)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	68,533	22 60,390
23 Land and buildings		23
24 Other assets (describe in Schedule O)	10,161	24 2,703
25 Total assets	78,694	25 63,093
26 Total liabilities (describe in Schedule O)	17,559	26 14,484
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	61,135	27 48,609

Part III Statement of Program Service Accomplishments

Check if the organization used Schedule O to respond to any question in this Part III

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

What is the organization's primary exempt purpose?
To operate as an alliance network for members of the Corporation for the purpose of the creation, growth and success of Kansas' software and information technology industry

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28 The Association's purpose is to educate and train managers in the software information and technology industry through the use of publications, newsletters, annual conferences, trade-shows and hands-on workshops (Grants \$ 95,866) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	
29 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a)	32	95,866

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(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
See Additional Data Table				

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

Check if the organization used Schedule O to respond to any question in this Part V

Form 990-EZ (2010) Part V Other Information. Questions 33-44d regarding organizational activities, tax returns, and financial accounts. Includes fields for Yes/No and numerical amounts.

Yes No

Table with 3 columns: Question (45, 45a, 46), Yes, No. Questions regarding controlled entities and political activities.

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 47-49b and 52.

Check if the organization used Schedule O to respond to any question in this Part VI

Yes No

Table with 3 columns: Question (47, 48, 49a, 49b), Yes, No. Questions regarding lobbying, school status, and related organizations.

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"

Table with 5 columns: (a) Name and address, (b) Title and average hours, (c) Compensation, (d) Contributions to benefit plans, (e) Expense account. Row 1 contains '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"

Table with 3 columns: (a) Name and address, (b) Type of service, (c) Compensation. Row 1 contains 'NONE'.

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

52 Did the organization complete Schedule A? NOTE: All Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A. Yes No

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.

Sign Here section with fields for Signature of officer (*****), Date (2011-10-05), and Type or print name and title (Perry Puccetti Chairman).

Paid Preparer's Use Only section with fields for Preparer's signature (Christopher Kohart), Date, Check if self-employed, Preparer's taxpayer identification number, Firm's name (Kohart Accounting PA), address, EIN, and Phone no.

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

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2010

**Open to Public
Inspection**

**Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.**

Department of the Treasury
Internal Revenue Service

Name of the organization

Software Information and Technology
Association of Kansas Inc

Employer identification number

26-2852304

Identifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 26 1003	Total Liabilities 1003	Deferred Revenue - Beginning \$11890 Deferred Revenue - Ending \$11890

Identifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 26 1001	Total Liabilities 1001	Accounts Payable and Accrued Expenses - Beginning \$5669 Accounts Payable and Accrued Expenses - Ending \$2594

Identifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 24 1011	Other Assets 1011	Prepaid Expenses and Deferred Charges - Beginning \$7217 Prepaid Expenses and Deferred Charges - Ending \$1586

Identifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 24 1005	Other Assets 1005	Accounts Receivable - Beginning \$1500 Accounts Receivable - Ending \$0

Identifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 24 1003	Other Assets 1003	Machinery and Equipment - Beginning \$1444 Machinery and Equipment - Ending \$1117

Identifier

Return Reference

Explanation

Form 990-EZ, Part I, Line 16 11

Other Expenses 11

IRS Tax Penalty \$-3351

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 10	Other Expenses 10	Franchise Tax \$40

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 9	Other Expenses 9	Repairs and Maintenance \$90

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 7	Other Expenses 7	Contract Labor \$310

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 6	Other Expenses 6	Supplies \$453

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 4	Other Expenses 4	Bank Fees \$1050

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 3	Other Expenses 3	Telephone \$1736

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 2	Other Expenses 2	Dues and Subscriptions \$1956

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 1	Other Expenses 1	Presentation/Trade Show \$7291

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 1012	Other Expenses 1012	Insurance \$2424

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 1009	Other Expenses 1009	Depreciation \$327

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 1007	Other Expenses 1007	Conferences, Conventions, and Meetings \$2976

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 1005	Other Expenses 1005	Travel \$3092

Identifier

Return Reference

Explanation

Form 990-EZ, Part I, Line 16 1001

Other Expenses 1001

Advertising and Promotion \$1617

Additional Data

Software ID: 10000105
Software Version: 2010v3.2
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
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		
Trish Brasted 7829 E Rockhill Rd 307 Wichita, KS 67206	Boardmember 0	0		
Rachel Hack 4431 Holly Street C Kansas City, MO 64111	Executive Direc 40 00	72,639		
Michelle Weigand 214 SW 6th Topeka, KS 66603	Boardmember 0	0		
Tim Johnson 211 South Seth Child Road Manhattan, KS 66502	Boardmember 0	0		
Ravi Pendse 109 Morrison Hall Wichita, KS 67260	Boardmember 0	0		
Greg Elliot 1102 Grand Ave Suite 2000 Kansas City, MO 64106	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		
Keith Braman 2335 Irving Hill Road Lawrence, KS 66045	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		

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
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		
Keith Moelzer 11011 Eicher Drive Lenexa, KS 66219	Boardmember 0	0		