990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

UMB No. 1545-04-24-2

Internal Revenue Service

Form

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

Open to Public Inspection

Δ Ι	For the	2011 calendar year, or tax year beginning 07-	-01, 2011 , and		9-11-01-1-01	06-30	, 20 12
					nc		
	Oneck flag North		91 TH EUGC			_	loyer identification no 3996564
	Address of						
	Name cha			Raoin sui	te	E Telep	phone number
1	nitial retur						
-	l'erminate					ł	332,543
. /	Amended	return Elizabethtown, KY 42701				G Gros	s receipts 3
	Appl:cation	pending F Name and address of principal officer Gary Grant		H(a)	ls this a arr	oun return for	
		2523 Chatsworth Drive, Elizabethtown, KY	42701		affiliates?	oup return for	Yes X No
1	Tax-exem	of status 501(c)(3) \times 501(c)(4) (insert no.) 4947(a)(1) or 5	27			ates included?	Yes No
J	Vebsite:	www.kyste.org				ich a list (see ir mption number	istructions:
K	Form of or	ganization X Corporation Trust Association Other L	Year of formation:	1997	M State	of legal domicil	e KY
Pa	rt I	Summary					
		Briefly describe the organization's mission or most significant activities: Kent	ucky Socie	ty For	Techno	logy in	Education,
		Inc. has as its mission to help Kentucky Schools imp	rove educa	tion by	using	technol	Logy .
A c G							
t o	1						
v e	2	Check this box > if the organization discontinued its operations or disposed	of more than 2	5% of its ne	et assets		
r t n	3	Number of voting members of the governing body (Part VI, line 1a)				3	17
i a		Number of independent voting members of the governing body (Part VI, line 1b				4	17
e n s c	1	Total number of individuals employed in calendar year 2011 (Part V, line 2a)			}	5	0
е &	1	Total number of volunteers (estimate if necessary)				6	20
		Total unrelated business revenue from Part VIII, column (C), line 12			}	7a	0
		Net unrelated business taxable income from Form 990-T, line 34			,	7b	0
	- 5	14et differed business taxable income from 1 offit 350-1, lifte 34	<u> </u>		or Year	70	Current Year
R		Contributions and grants (Part VIII, line 1h)			Ur i car		0
e v	1	Program service revenue (Part VIII, line 2g)			316	, 634	332,543
e	!					, 034	332,343
n u		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-			
е	•	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			21.6	634	0
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12			316	, 634	332,543
	- 1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)					0
Ε		Benefits paid to or for members (Part IX, column (A), line 4)					0
х р		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1	•		13	,072	13,967
е	i	Professional fundraising fees (Part IX, column (A), line 11e)			· · · · · · · · · · · · · · · · · · ·		0
n s	1	Total fundraising expenses (Part IX, column (D), line 25)▶	0				
e s	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)				,252	254,083
-	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)				,324	268,050
	19	Revenue less expenses. Subtract line 18 from line 12	· · · · · · · · ·		24	,310	64,493
Net	_			Beginning o	of Current Y	ear	End of Year
Asset or	20	Total assets (Part X, line 16)			140	,041	184,682
Fund Bal-	21	Total liabilities (Part X, line 26)					0
ances	22	Net assets or fund balances. Subtract line 21 from line 20	<u> </u>		140	,041	184,682
	rt II	Signature Block					
		of perjury, I declare that I have examined this return including accompanying schedules and statements of complete. Declaration of preparer (other than officer) is based on all information of which preparer has a		y knowledge ar	nd belief it	IS	
						Т	
	ļ						
Sig	n	Signature of officer				Date	
Hei	re	Gary Grant, Executive Director					
		Type or print name and title					
		Print/Type preparer's name Preparer's signature	Date	С	heck X	if PTIN	
Pai	d	Judy Ward	11-07-2012	5	elf-employe	ed PO	1204303
	parer	Firm's came Empire Tax		Firm's EIN	۱)	1	
	e Only	Family address 169 East Vine Street		Pinero			
	,	Radcliff KY 40160		!		270-3	51-9979
May	the IRS	discuss this return with the preparer shown above? (see instructions)		i			Yes X No
iviay	310 1110	- Groups and rotally with the property shown above: (see instructions)	· · · · · · · ·	<u> </u>	· · · · ·	<u> </u>	7 103 A 113

Form 990 (2011) Kentucky Society for Technology in Education, Inc.

20-8996564

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Pai	rt IV Checklist of Required Schedules			
			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	1		Х
2	Is the organization required to complete Schedule B. Schedule of Contributors? (see instructions)?	2		Χ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Χ
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			 -
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues.			
_	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	!		
	"Yes." complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space.			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D. Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	-		-23
	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,			<u> </u>
	VII, 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
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			1
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	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			
	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, XII, and XIII	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, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investmetnt, and program service activities outisde the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F. Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX. column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
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		X
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		X
20a	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 its audited financial statements to this return?	20b		

Checklist of Required Schedules (continued)

Part IV

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Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization Χ Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 22 22 Χ Did the organization answer "Yes" to Part VII. Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated X 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 24a X Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a 25a Χ Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25b Χ Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes." complete Schedule L, Part II 26 Χ Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial 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 III 27 Χ 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part IV instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV....... 28a Χ A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b Χ An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) С was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Χ Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Χ Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 30 Χ Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. 31 31 Χ Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 32 Χ Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Χ 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III. 34 34 Χ Χ 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 35b Χ Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 37 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. Χ Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and Χ

Part V Statements Regarding Other IRS Filings and Tax Compliance

- 41	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		1	
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
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," provide an explanation in Schedule O	3b		
4a	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)?	4a		_X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	_		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u>X</u>
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	C-		
h	organization solicit any contributions that were not tax deductible?	6a		X
b	gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).	OD.		
' a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
a	and services provided to the payor?	7a		ľ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
-	required to file Form 8282?	7c		ı
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		[
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			l
	organization, have excess business holdings at any time during the year?	8		ĺ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		L
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			ĺ
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			1
b	Gross income from other sources (Do not net amounts due or paid to other sources		1	
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		1.50	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		<u> </u>	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		-
4	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			ĺ
_	Enter the amount of reserves on hand			
C 1/12	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
14a	- 2-2 title digamental todate any paymonte for mader tarning derived during the tax year.	1.70	ì	1 1

Part VI

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Sec	tion 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 17			
	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.			
b	Enter the number of voting members included in line 1a. above, who are independent 1b 17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	 		İ
	any other officer, director, trustee, or key employee?	2		Χ
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Χ
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Χ
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members.			
	stockholders, or persons other than the governing body?	7b	······································	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	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	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
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		ļ
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
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		<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			l
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director. or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
40-	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	40-		.,
	with a taxable entity during the year?	16a		X
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16h		İ
500	tion C. Disclosure	16b		<u> </u>
5ec	List the states with which a copy of this Form 990 is required to be filed	1.21.		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
10	available for public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
10	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy.			
19	and financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
20	organization • Gary Grant (270) 982-9207 2523 Chatsworth Drive Elizabethtown	κv	4270	11

20-8996564

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

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

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

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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (C) (D) (E) (F) Name and Title Average Position Reportable Reportable Estimated hours per compensation compensation from amount of (do not check more than one week related other box, unless person is both an organizations compensation organization (W-2/1099-MISC) hours for from the officer and a director/trustee) (W-2/1099-MISC) related organization H c e i o m g m p l e e o y t s e d and related organizations organizations in Schedule e m p c e r i e t de o t e a e a o (1) Angie White 2.00 O Region 4 Rep Χ 0 0 (2) Carla Perkins 2.00 O 0 Region 6 Rep Χ a (3) Cary Peterson 2.00 President Χ 0 0 0 (4) Diana McGhee Vice President 2.00 0 0 Χ 0 (5) Erin Waggoner 2.00 Region 5 Rep Χ α 0 0 (6) Greg Conway REgion 7 Rep 2.00 Χ ٥ 0 0 (7) Greta Casto 2.00 Secretary Χ a 0 0 (8) Jeff Coots 2.00 Region 8 Rep Χ 0 0 0 (9) Jeffrey Jones Past President 2.00 Χ d 0 0 (10)Jeffrey Jones Commmunications 2.00 0 X d 0 (11)Karen Wallace 2.00 Region I Rep Χ a 0 (12)Matthew Constant 2.00 Treasurer Χ 0 0 0 (13)Michele Crowley ISTE Liaison 2.00 \mathbf{q} Χ 0 0 (14)Robbie Forsythe q Region 2 Rep 2.00

X

Part VII Section A. Officers, Directors, Trustees	, Key Emplo	yees,	and	Hig	hes	t Com	per	sated Employees	(continued)		
(A)	(B)			(0				(D)	(E)		(F)
Name and Title	Average Position					ian one		Reportable	Reportable	1	st mated
	hours per week	1				both an		compensation from	compensation from related	31	nount of lather
	describe	office	r and	direc	tor/tr:	ustee)		the	organizations		pensation
	hours for	l t d	l t n r	O	K	H c e	F 0	organization (W-2/1099-MISC)	(W-2/1099-MISC)	i	rom the
	related organizations	der	s u	f	e y	gmp	r	(**-27-059-14113C)	1	1	janication idirelated
	in Schedule	ı s e v t c	i t	c	e m	n p l e e o	m e			org	anizations
	O)	l e t d e o	uе	e r	р	s n y	1				
		ac	:		0	a e ·					
	1	li L	n a		e	e d					
5 Sharon Shrout	-										
Region 3 Rep	2.00	X						C	! ! 0		
(6)Susan Jenkins	1	Δ_									
Parliamentarian	2.00	Х						c	0		
17)Tony Carr	-	†						4200			
KDE Liaison	2.00	X						c	0		
18)Gary Grant											
Executive Director	10.00	ļ		X				13,967	0		
9)											
20)											
21)						-					
,											
(2)											
23)											
24)											
25)		 									
b Sub-total		<u> </u>	L	L	<u> </u>	<u> </u>				-	
c Total from continuation sheets to Part VII, Section	n A						•				
d Total (add lines 1b and 1c)							•	13,967	o		
Total number of individuals (including but not limited							nore	than \$100,000 in			
reportable compensation from the organization									0		
										r	Yes
Did the organization list any former officer, director of					-						
employee on line 1a? If "Yes," complete Schedule J									• • • • • • • •	3	
For any individual listed on line 1a, is the sum of repo											
organization and related organizations greater than \$			com	piet	e 50	cneau	елі	or sucn			
individual			 nv.u	nrai	· ·	· · ·	· ·	ion or individual	• • • • • • • •	4	-
Did any person listed on line 1a receive or accrue co for services rendered to the organization? If "Yes," or						_		·····		5	
Section B. Independent Contractors					<u> </u>			· · · · · · · · · · · · · · · · · · ·		<u> </u>	l
Complete this table for your five highest compensate compensation from the organization. Report compensation											
year.											
(A) Name and business address								(B) Description of s	ervices		(C) ensation
	,				**						

Part \	/111	Statement of Revenue					_
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-513 or 514
	1a	Federated campaigns 1a			* *		
	b	Membership dues 1b					
ontri- itions,	С	Fundraising events 1c					
ts.	d	Related organizations 1d					
ants	е	Government grants (contributions) 1e					
i ner	f	All other contributions, gifts, grants.					
nilar		and similar amounts not included above 1f					
ounts	q	Noncash contributions included in lines 1a-1f: \$		1			
		Total. Add lines 1a-1f		-			
		Total Machine Inc.	Business Code				
	22	Conference Revenue	611710	332,543	332,543		
	b	COMPTENCE NEVENUE	011710	332,343	332,343		
gram							
vice venue	d	AND THE REST OF THE PARTY OF TH					
	e f	All other program service revenue					
		Total. Add lines 2a-2f		332,543		T	
				332,343			1
	3	Investment income (including dividends, interest and other similar amounts)	,				
	4	Income from investment of tax-exempt bond pro-					
	5	•					
	5	Royalties	(ii) Personal			-	
	6.		(II) Personal				
	ĺ	Gross rents		-			
		Less: rental expenses					
		Rental income or (loss)					
		Net rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	(ii) Other				
	b	Less: cost or other basis					
0		and sales expenses		4	in the first		
ť	С	Gain or (loss)					
h e	d	Net gain or (loss)					
r	8a	Gross income from fundraising					
_		events (not including \$					
R e		of contributions reported on line 1c).		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
v		See Part IV, line 18 a					
e n	b	Less: direct expenses b			. *		1
u	С	Net income or (loss) from fundraising events .					
е	9a	Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less: direct expenses b					
	С	Net income or (loss) from gaming activities	>				
	10a	Gross sales of inventory, less					
		returns and allowances a					
	b	Less: cost of goods sold b					-
	С	Net income or (loss) from sales of inventory	>				
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d					T
	12	Total revenue. See instructions		332,543	332,543	the second control of the second control of	d

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any que o not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
•	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
o, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
Grants and other assistance to governments and				
organizations in the United States. See Part IV, line 21.				
Grants and other assistance to individuals in				
the United States. See Part IV. line 22				
Grants and other assistance to governments,				
organizations, and individuals outside the				
United States See Part IV lines 15 and 16				
Benefits paid to or for members				
Compensation of current officers, directors,				
trustees, and key employees				
Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)				
Other salaries and wages	13,967	13,967		
Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)				
Other employee benefits				
9 Payroll taxes				
1 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	3,282		3,282	
d Lobbying				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees				
g Other				
2 Advertising and promotion	563	563		
3 Office expenses	5,795		5,795	
4 Information technology	2,100		2,100	
5 Royalties				
6 Occupancy				
7 Travel	1,125	1,125		
8 Payments of travel or entertainment expenses				
for any federal, state, or local public officials				
9 Conferences, conventions, and meetings	237,165	237,165		
0 Interest				
1 Payments to affiliates				
2 Depreciation, depletion, and amortization				
3 Insurance	2,724	2,724		
4 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.)				
a Bank Fees	999		999	
b Meals	330	330		
c				
d				
e All other expenses				
5 Total functional expenses. Add lines 1 through 24e .	268,050	255,874	12,176	
6 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 following SOP 98-2 (ASC 958-720)				

Part	t X	Balance Sheet			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	140,041	1	184,682
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	'
	6	Receivables from other disqualified persons (as defined under section			i.
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
A S		employers and sponsoring organizations of section 501(c)(9) voluntary			
s		employees' beneficiary organizations (see instructions)		6	' '
е	7	Notes and loans receivable, net		7	
ι S	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a			
	ь	Less: accumulated depreciation 10b	EA the could be a high species of the country of the	10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11	<u> </u>	13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	184,682
	17	Accounts payable and accrued expenses		17	<u>'</u>
	18	Grants payable		18	
	19	Deferred revenue		19	
ŀ	20	Tax-exempt bond liabilities		20	
a	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
b	22	Payables to current and former officers, directors, trustees, key			
i		employees, highest compensated employees, and disqualified persons.			
į		Complete Part II of Schedule L		22	6.1 A.754/1906-190 (S. 154)
i	23	Secured mortgages and notes payable to unrelated third parties		23	
е	24	Unsecured notes and loans payable to unrelated third parties		24	
S	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		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
		Organizations that follow SFAS 117, check here ▶ ☐ and complete	The state of the s		
NF		lines 27 through 29, and lines 33 and 34.			And the second
e u	27	Unrestricted net assets	A CONTRACTOR OF THE STATE OF TH	27	
t n	28	Temporarily restricted net assets		28	
Α _	29	Permanently restricted net assets		29	
s B s a		Organizations that do not follow SFAS 117, check here ▶ 汉 and	an an ing makang mga mga mga mga mga mga mga mga mga mg	77.5	The figure of the second of th
e i		complete lines 30 through 34.	A SERVICE OF THE TOWN ASSET TO MAKE THE THE TOWN ASSET TO THE TOWN ASSET TO THE TOWN ASSET TOWN ASSET TOWN ASSET TOWN ASSET TO THE TOWN ASSET TOWN ASSET TO THE TOWN ASSET TOWN		
t a	30	Capital stock or trust principal, or current funds	January 1994 - Marie Marie 1995 - 1995 - 1995 - 1995 - 1996 - 199	30	American Section 1 Comments of the Comments of
s n	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
o e	32	Retained earnings, endowment, accumulated income, or other funds , .	140,041	32	184,682
r s	33	Total net assets or fund balances	140,041	33	184,682
	34	Total liabilities and net assets/fund balances	140,041	34	184,682

orm	990 (2011) Kentucky Society for Technology in Education, Inc. 20-	-8996564	1	P;	age 1 2
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		<u></u> .	• • •	•
1	Total revenue (must equal Part VIII, column (A), line 12)	1	:	332,5	543
2	Total expenses (must equal Part IX, column (A), line 25)	2		268,0	050
3	Revenue less expenses. Subtract line 2 from line 1	3		64,	493
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	:	140,0	041
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33.				
	column (B))	6	_ :	204,	534
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other." explain in				
	Schedule O.			l	
	Were the organization's financial statements compiled or reviewed by an independent accountant?	}	2a		X
	Were the organization's financial statements audited by an independent accountant?		2b		Χ
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			1	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	<u> </u>	ļ
	If the organization changed either its oversight process or selection process during the tax year, explain in		i		
	Schedule O.			İ	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			l	1

Both consolidated and separate basis

За

3b

Form 990 (2011)

issued on a separate basis, consolidated basis, or both:

Separate basis

Consolidated basis

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Employer identification number

2011

Open to Public Inspection

Ker	ntucky Society for Technology in Education, Inc.	20-8996564
Pai		Accounts. Complete if
	the organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and 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?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be	
•	used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other	
	purpose conferring impermissible private benefit?	Yes No
Pai	t II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part I	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
•	Preservation of land for public use (e.g., recreation or education) Preservation of an historically	important land area
	Protection of natural habitat Preservation of a certified his	•
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	enservation
_	easement on the last day of the tax year.	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06 and not on a historic	
Ū	structure listed in the National Register.	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	
•	the tax year	madion daming
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
•	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the	
•	>	,
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the ye	ar
•	> \$	
8	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)?	Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense state	******
•	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements the	
	the organization's accounting for conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Othe	r Similar Assets
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a	ind balance sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance	e of public service.
	provide, in Part XIV, the text of the footnote to its financial statements that describes these items.	F
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and t	palance sheet works of art.
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	
	provide the following amounts relating to these items:	1
	(i) Revenues included in Form 990, Part VIII, line 1	⊳ \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain.	The statement of the st
-	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	, , , , , , , , , , , , , , , , , , , ,
а	Revenues included in Form 990, Part VIII, line 1	⊳ s
h	Assets included in Form 990, Part X.	The second secon

3 Using the organization's acquisition accession and other records check any of the following that are a significant use of its cellection terms (check all that apply) 3 Public exhibition de Coher	Part	III Organizations Maintaining	Colle	ctions of	Art, Hist	orical T	reasures,	or Oti	ner Similar As	sets (c	ontinue	ed)
Public exhibition d Loan or exchange programs	3	Using the organization's acquisition, accession	n. and ot	her records.	check any	of the foll	lowing that a	re a sign	ificant use of its			
b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be soid to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV Ine 5 or reported an amount on Form 990. Part X Ine 21 1 Is the organization an agent, frustee custodian or other intermediary for contributions or other assets not included an organization an agent. Frustee custodian or other intermediary for contributions or other assets and included an organization an agent. Frustee custodian or other intermediary for contributions or other assets and included an organization an agent. Frustee custodian or other intermediary for contributions or other assets and include an amount on Form 990. Part X Ine 21 2 Segming balance 1 1d		collection items (check all that apply):										
Provided a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV Part VI	а	Public exhibition		d Loa	n or excha	nge progr	ams					
Provided a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV Part VI	b	Scholarly research		e Oth	er							
Part XIV During the year did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No	С	Preservation for future generations								2		
Part V	4	Provide a description of the organization's coll	ections a	and explain h	now they fu	rther the	organization'	s exemp	t purpose in			
No Part IV Excrow and Custodial Arrangements. Complete if organizations answered Yes to Form 990. Part IV Ine 9 or reported an amount on Form 990, Part X Ine 21		Part XIV.										
Part V Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990. Part X line 9, or reported an amount on Form 990. Part X, line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included Part X line 21 Included Part Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 I	5	During the year, did the organization solicit or	receive of	donations of	art, histori	cal treasu	res, or other	similar				
Part V Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990. Part X line 9, or reported an amount on Form 990. Part X, line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included on Form 990. Part X line 21 Included Part X line 21 Included Part Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 Included Part X line 21 I		assets to be sold to raise funds rather than to	be main	tained as pa	rt of the or	ganization	s collection?	?			Yes	No
Signal S												
Included on Form 990. Part X? Yes No		Part IV. line 9, or reported an amou	unt on Fo	orm 990. Par	t X. line 21							
Beginning balance	1a	Is the organization an agent, trustee, custodia	n or othe	er intermedia	ry for cont	ibutions o	or other asse	ts not				
Amount Amount Amount Amount Amount Amount Amount Amount Amount Amount Additions during the year 1d		included on Form 990, Part X?									Yes	No
Beginning balance d Additions during the year Distributions during the year 1e Intimitiative expension include an amount on Form 990, Part X, line 21? Part V Endowment Funds, Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance (a) Current year (b) Prior year (d) Two years back (d) Three years back (e) Four years back Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Permanent endowment See Form 990, Part IV, line 10. In Beginning of year balance Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Permanent endowment See Form 990, Part IV, line 10. In Beginning of year balance Frequency and the service of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment See Form 990, Part XI line 10. Permanent endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations Frequency is a facilities and part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organizatio	b	If "Yes," explain the arrangement in Part XIV a	and com	plete the follo	owing table	:						
d Additions during the year 1									Am	iount		
e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 3 Did the organization include an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10	С	Beginning balance						10				
f Ending balance Tele	d	Additions during the year						10				
2a Did the organization include an amount on Form 990, Part X, line 21?	е	Distributions during the year						1e				
Fire Section Fire	f	Ending balance						1f				
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Call Current year (b) Prior year (c) Two years back (d) Trively years back (d) Trively years back (d) Trively years back (d) Trively years back (d) Trively years back (d) Trively years back (d) Trively years back (d) Trively years back (d) Trively years back (e) Four years back (d) Trively years back (d) Trively years back (e) Four years back (d) Trively years back (e) Four years back (e) Four years back (e) Four years back (d) Trively years back (e) Four years (e) Four years back (e) Four years (e) Four years back (e) Four years (e) Four ye	2a	Did the organization include an amount on Fo	rm 990,	Part X, line 2	21?					• •	Yes	No
Seginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back	-											
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships	Par	t V Endowment Funds. Complete	e if the o	rganization a	answered "	Yes" to Fe	orm 990, Par	t IV, line	10.			
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % c Temporarily restricted endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii) are the related organizations listed as required on Schedule R? 3a(ii) b If "Yes" to 3a(ii) are the related organizations listed as required on Schedule R? 3a(ii) c Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's			(a) C	urrent year	(b) Pro	or year	(c) Two year	s back	(d) Three years back	(e) For	ır years b	ack
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	1a	Beginning of year balance										
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 8 Board designated or quasi-endowment % 6 Permanent endowment % 7 The percentages in lines 2a, 2b, and 2c should equal 100% 8 Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii) are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. See Form 990. Part X. line 10. Describe in Part XIV the intended uses of the organization's endowment funds (a) Cost or other basis (b) Cost or other depreciation 1a Land b Buildings c Leasehold improvements d Equipment c Equipment c Equipment c Other STMP1E												
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % c Temporarily restricted endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations 3a(i)									<u></u>			
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b Buildings		Businphan of gropolity	į					1	1	(4) 50	OK 13/40	
b Buildings	1a	land										
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				m 990, Part	X, column	(B), line 1	10(c).)	• • • •	>			

Schedule D (Form	990) 2011	Kentucky Soci	ety for Technology in	Education,	Inc.	20-8996564	Page
Part VII	Investments - 0	Other Securities.	See Form 990, Part X, line 12.				·
	(a) Description of security or Encluding name of sec		(b) Book value			ethod of valuation of-year market value	
(1) Financial d	erivatives						
	ld equity interests		-				
(3) Other							
(A)		7 140					
(B)							
(C)							
(D)				Ĺ			
(E)							
(F)				<u> </u>			
(G)							
(H)						* ************************************	
(1)							
	oi must equal Form 990 Part X	, 601 (57 10 6 12)	<u> </u>				·
Part VIII	Investments - F	Program Related.	See Form 990, Part X, line 13.	·			
	(a) Description of investm	ent type	(b) Book value			ethod of valuation I-of-year market value	
(1)							
(2)		response to the same and the sa					
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)		(/B)	>				
Part IX	Other Access	See Form 990, Part X. I	·	1			
rait ix	Other Assets.		a) Description			(b) B	ook value
(1)						(2) 3.	701.44
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							-
(8)							
(9)	-						
(10)							
	in (b) must equal Form			· · · · · · · ·		🕨	
Part X	Other Liabilities	. See Form 990. Part >	C, line 25.				
1.	(a) Description of liab	oility	(b) Book value				
	income taxes						
(2)							
(3)							
(4)							
(5)							
(6)	W. (7)	70.7					
(7)							
(8)	and and the same a		To the second se				
(9)	The second secon						
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	and the second of the second o	man a commence of the contract	of the footnote to the organization	n's financial eta	tements th	nat reports the	

organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Schedule D (Form 990) 2011

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial State	ments
1	Total revenue (Form 990, Part VIII. column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3
4	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV.)	8
9	Total adjustments (net). Add lines 4 through 8	9
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per I	Return
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
а	Net unrealized gains on investments 2a	
b	Donated services and use of facilities	
С	Recoveries of prior year grants	
d	Other (Describe in Part XIV.)	
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIV.)	
С	Add lines 4a and 4b	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
а	Donated services and use of facilities	
b	Prior year adjustments	
С	Other losses	
đ	Other (Describe in Part XIV.)	
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIV.)	
_ C	Add lines 4a and 4b	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
	t XIV Supplemental Information	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b	
	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete	
this p	part to provide any additional information.	

Page 4

internal Revolue Service

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

► See separate instructions.

CMB No. 1545-0155 Attachme 179

Business or activity to which this form relates Identifying number Name(s) shown on return Kentucky Society for Technology Form 990 - 1 20-8996564 Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount (see instructions) . Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (b) Cost (business use only) (a) Description of property (c) Elected cost 6 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property, Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the **smaller** of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562. 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2012. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election . 15 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A MACRS deductions for assets placed in service in tax years beginning before 2011 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B - Assets Placed in Service During 2011 Tax Year Using the General Depreciation System Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (e) Convention (f) Method placed in (business/investment use (a) Depreciation deduction period only-see instructions) service 3-year property 5-year property 3100 НΥ 200 DB 992 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs. 5/1 h Residential rental 27.5 yrb MM property 27.5 yrs ММ 3/1 39 yrd. i Nonresidential real 1.11/./ MM Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs 40 yrs. MM c 40-year 9/1 Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations -- see instructions 22 192 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.

Form -	4562 (2011)															1	⊃age 2
Par	t V Listed	1 Propert	y (Inclu	de autor	nobiles,	cert	ain oti	her v	ehicle	s, c	certai	n con	puters	s, and	prope	erty use	ed for
	entert	ainment, r	recreation	n, or amu	sement.)											
		For any ve		-		•			•			~	leas e e	expense	, comp	olete on	ly 24a,
		olumns (a)															
		- Depreci						See th								obiles.)	
24a	Do you have ev	vidence to su		siness/inves	tment use	claime		Yes	No	24	4b If	'Yes, ' is	the evid	ence wri	tten?	Yes	No
	(a)	(b)	(c) Business/	10	d)	Rasis	(e) for depred	ciation	(f)			(g)		(h)		(i)	
	of property (list ehicles first)	Date placed in service	investment us	1 '	ther basis	1	ess/inves		Recove		1 .	thod/ vention		rectation duction	Ele	ected sect cost	on 179
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	the tax year							e (see	instruc	ction	ns) .	25					
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27	Property use	ed 50% or	less in a q	ualified bu	isiness u	se:					·			***			
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29	Add amount	ts in colum	n (i), line 2										<u> </u>		29		
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	di employees	, macanawa	i uic quesi	tions in ooc	T		·		T		3 (3)(1)	1		T			
	Total business/investment miles driven during the year (do not include commuting miles).			(a) (b) Vehicle 1 Vehicle 2			\ v				(d) (e) nicle 4 Vehicle 5			(f) Vehicle 6			
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	employees?			*	•		•					•		٠			
39	Do you trea	t all use of	vehicles b	y employe	es as pe	rsona	l use?										
40	Do you pro	vide more	than five	vehicles to	your en	nploye	es, obt	tain in	format	ion	from	your er	nploye	es abou	it the		
	use of the v				-												
41	Do you mee	et the requi	rements c	oncernina	qualified	autor	nobile (demor	nstratio	on u	se? (S	See inst	ruction	s.) .			
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Par	rt VI Amo	rtization		······································	······												
			T	(b)	T					~~~·			(e)				
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	Descripti			begins		. (11.01		.,		500	,000		percen				yeur
42	Amortization	of costs th	at begins	during you	2011 tax	year	(see ins	tructio	ns):								
				·									*****				

Amortization of costs that began before your 2011 tax year
 Total. Add amounts in column (f). See the instructions for where to report

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

OMB No. 1545 0047

2011

Open to Public Inspection

Employer identification Name of the organization Kentucky Society for Technology in Education, Inc. 20-8996564 01. Form 990 governing body review (Part VI, line 11) Form 990, Part VI, Section A, Line 6: The organization has members who elect representatives from the various regions. The organization has membes who elect Form 990, Part VI, Section A, Line 7A: representatives from the various regions. Form 990, Part VI, Section B, Line 11: The board will review and distribute the 990 to all members at the monthly board meeting following its completion. Form 990, Part VI, Section B, Line 12C: At the spring retreat, the conflict of interest policy is reviews with both the current and income board members. The board of directors determines CEO Form 990, Part VI, Section B, Line 15A: The CEO is under a one year contract as an independent contractor; said contract is reviewed and voted on annually at the spring retreat. 02. Governing documents, etc, available to public (Part VI, line 19) Form 990, Part VI, Section C, Line 19: The organization's governing documents, conflict ofinterest policy and financial statements are available to the public upon request to the appropriate individuals.