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**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)

1005
OMB No. 1545-1150

2009

**Open to Public
Inspection**

Form **990-EZ**

▶ 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.

Department of the Treasury
Internal Revenue Service

A For 2009 calendar year, or tax year beginning JUNE 01, 2009, **and ending** MAY 31, 20 10

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization Small Business Exchange Network	D Employer identification number 58-1998302
		Number & street (or P.O. box, if mail is not delivered to street addr.) Room/suite PO Box 13785	E Telephone number (912) 728-9013
		City or town, state or country, and ZIP + 4 Savannah GA 31416	F Group Exemption Number .. ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts each completed Schedule A (Form 990 or 990-EZ).
G Accounting Method Cash Accrual
 Other (specify) ▶

I Website: ▶ www.smallbusinesschamber.org
H Check if organization is not required to attach Sch. 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 ▶ \$ 11,435

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

1	Contributions, gifts, grants, and similar amounts received	1	
2	Program service revenue including government fees and contracts	2	7,670
3	Membership dues and assessments	3	3,765
4	Investment income	4	
5a	Gross amount from sale of assets other than inventory	5a	
5b	Less cost or other basis and sales expenses	5b	
5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
6a	Gross revenue (not including \$ of contributions reported on line 1)	6a	
6b	Less direct expenses other than fundraising expenses	6b	
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	
7a	Gross sales of inventory, less returns and allowances	7a	
7b	Less: cost of goods sold	7b	
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8	Other revenue (describe ▶)	8	
9	Total revenue. All lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	11,435
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	
13	Professional fees and other payments to independent contractors	13	7,470
14	Occupancy, rent, utilities, and maintenance	14	472
15	Printing, publications, postage, and shipping	15	466
16	Other expenses (describe ▶ See attachment #1)	16	686
17	Total expenses. Add lines 10 through 16	17	9,094
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	2,341
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	3,751
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	6,092

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.

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	3,751	6,092
23	Land and buildings		
24	Other assets (describe ▶)		
25	Total assets	3,751	6,092
26	Total liabilities (describe ▶)	0	0
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	3,751	6,092

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Form **990-EZ** (2009)

STATUTE CLEARED JAN 15 2014 04:55:03186 S. Terbet

STATUTE UNIT RECEIVED JAN 13 2014 TPR BRANCH OGDEN

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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		X
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		X
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?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		X
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		X
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	X
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	X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved.	38b	
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9	39a	
b	Gross receipts, included on line 9, for public use of club facilities	39b	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911; section 4912; section 4955		
b	Section 501(c)(3) and 501(c)(4) organizations. 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	X
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		
e	All organizations. 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	X
41	List the states with which a copy of this return is filed. NONE		
42a	The organization's books are in care of See attachment #4 Telephone no. Located at ZIP + 4		
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	X
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	X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 -- Check here 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	X
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	X

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.

Table with 3 columns: Question (46-49b), Yes, No. Questions cover political campaign activities, lobbying, school status, and transfers to exempt organizations.

Table for line 50: Five highest compensated employees. Columns: (a) Name and address, (b) Title and average hours, (c) Compensation, (d) Contributions to benefit plans, (e) Expense account.

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 for line 51: Five highest compensated independent contractors. Columns: (a) Name and address, (b) Type of service, (c) Compensation.

d Total number of other independent contractors each receiving over \$100,000 . . . ▶ _____

Sign Here: Declaration of preparer. Signature of officer: Cindy L. Klein. Date: 9-24-13. Title: Treasurer.

Paid Preparer's Use Only: Preparer's signature: Cindy L. Klein. Date: 08-28-2013. Firm's name: H&R BLOCK US TAX SERVICES. Address: 7505 WATERS AVE E9, Savannah, GA 31406. Phone no.: 912-355-2643.

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

SCHEDULE OF OTHER EXPENSES

Attachment 1: page 1 - 990-EZ Page 1, Part I, Line 16

Open to Public Inspection	For calendar year 2009 or tax period beginning	06-01-2009, and ending	05-31-2010.
Name of Organization Small Business Exchange Network			Employer Identification Number 58-1998302

Description of Other Expenses	Amount
Marketing	514
Bank Service Charges	10
PayPal Fees	77
Office Supplies	85
Total	686

PRIMARY EXEMPT PURPOSE

Attachment 2: page 1 - 990-EZ Page 2, Part III

Open to Public Inspection	For calendar year 2009 or tax period beginning	06-01	, and ending	05-31-2010.
Name of Organization				Employer Identification Number
Small Business Exchange Network				58-1998302

Primary Purpose

The Small Business Exchange Network provides opprotunities for local Small Business Owners to meet and network. There are four primary ways that this is accomplished. 1. Monthly Breakfast Meetings for networking and educational purposes. 2. Lunch and Learn Meetings 2-3 times per year with a guest speaker who will focus on a topic relevant to small business owners. 3. Business After Hours Events 1-2 times per year. This provides a networking opportunity and the opportunity for the host business to showcase their business to other small business owners. 4. Other activities - su8ch as a year end banquet.

CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 3: page 1 - 990-EZ Page 2, Part IV

Open to Public Inspection	For calendar year 2009 or tax period beginning 06-01-2009, and ending 05-31-2010.
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Name of Organization Small Business Exchange Network	Employer Identification Number 58-1998302
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(A) Name and Address	(B) Title and Average Hrs. per Week	(C) Compensation (If not paid, enter 0)	(D) Cont. to Employee Ben. Plans & Def. Comp	(E) Expense Account & Other Allowances
Jennifer Brewster 110 Chatsworth Road Savannah, GA 31416	President 5.00	0	0	0
Jennifer Melear PO Box 13220 Savannah, GA 31415	Secretary 5.00	0	0	0
Cindy Klein 409 Banberry Court Guyton, GA 31312	Treasurer 5.00	0	0	0
Craig Simpson 410 E Victory Drive Savannah, GA 31405	Website 4.00	0	0	0
Dana Skiljan 6821 Waters Avenue Savannah, GA 31416	Marketing 5.00	0	0	0
Constance Hallaran 302 W Waldburg Street Savannah, GA 31401	Social 4.00	0	0	0
Cindy Wallace 725 Laurel Hill Circle Richmond Hill, GA 31324	Membership 5.00	0	0	0

BOOKS ARE IN CARE OF

Attachment 4 - 990-EZ Page 3, Part V, Line 42a

Open to Public Inspection	For calendar year 2009 or tax period beginning	06-01	, and ending	05-31-2010.
Name of Organization				Employer Identification Number
Small Business Exchange Network				58-1998302
Part V - Line 42a				

Individual Name Cindy L Klein
or
Business Name.

Street Address 409 Banberry Court

U.S. Address:

Zip code 31312 City Guyton State GA

or

Foreign Address

City _____

Province or State _____

Country _____

Postal code _____

Phone Number (912) 728-9013

Fax Number _____