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Form **990-EZ****Short Form**
Return of Organization Exempt From Income Tax

OMB No 1545-1150

2012**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

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.

A For the 2012 calendar year, or tax year beginning **October 1**, 2012, and ending **September 30**, 20 **13**

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

C Name of organization
KIWANIS CLUB OF SKIDAWAY
 Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
600 LANDINGS WAY SOUTH 600A
 City or town, state or country, and ZIP + 4
SAVANNAH, GA 31411-2854

D Employer identification number
58 1881459

E Telephone number
912 598-9960

F Group Exemption Number **▶**

G Accounting Method: ☒ Cash ☐ Accrual Other (specify) **▶**

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

I Website: **▶ www.kiwanisofskidaway.com**

J Tax-exempt status (check only one) - ☐ 501(c)(3) ☒ 501(c) (**4**) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check ☐ if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

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 **▶ \$ 144304**

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 ☒

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	122699
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	19555
	4 Investment income	4	38
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c Less: direct expenses from gaming and fundraising events	6c		
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a Gross sales of inventory, less returns and allowances	7a		
b Less: cost of goods sold	7b		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8 Other revenue (describe in Schedule O)	8	2012	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	144304	
Expenses	10 Grants and similar amounts paid (list in Schedule O)	10	85510
	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	
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe in Schedule O)	16	57343
	17 Total expenses. Add lines 10 through 16	17	142853
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	1451
	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	33082
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	34533

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 10642I

Form **990-EZ** (2012)

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Part II **Balance Sheets** (see the instructions for Part II)
Check if the organization used Schedule O to respond to any question in this Part II ☐

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

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	33082	22 34533
23	Land and buildings		23
24	Other assets (describe in Schedule O)		24
25	Total assets	33082	25 34533
26	Total liabilities (describe in Schedule O)		26
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	33082	27 34533

Part III	Statement of Program Service Accomplishments (see the instructions for Part III)	Expenses (Required for section 501(c)(3) organizations)
	Check if the organization used Schedule O to respond to any question in this Part III <input checked="" type="checkbox"/>	

Check if the organization used Schedule O to respond to any question in this Part III ☒ (Required for section

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

28		
(Grants \$) If this amount includes foreign grants, check here	28a	
29		
(Grants \$) If this amount includes foreign grants, check here	29a	
30		
(Grants \$) If this amount includes foreign grants, check here	30a	
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here	31a	
32 Total program service expenses (add lines 28a through 31a)	32	

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 ☒

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

[illegible]

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	✓
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34	✓
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	✓
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	✓
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a	37a	
b Did the organization file Form 1120-POL for this year?	37b	✓
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 tax year covered by this return?	38a	✓
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 did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	✓
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	✓
41 List the states with which a copy of this return is filed ► UT		
42a The organization's books are in care of ► Jay D. Ahrens, V.P./Treasurer Telephone no. ► 912 598-9960 Located at ► 3 Shagbark Lane, Savannah, GA ZIP + 4 ► 31411-2854		
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)?	42b	✓
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 .		
c At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c	✓
If "Yes," enter the name of the foreign country. ►		
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	<input type="checkbox"/>
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	✓
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	✓
c Did the organization receive any payments for indoor tanning services during the year?	44c	✓
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	✓
45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	✓

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		<input checked="" type="checkbox"/>

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51

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

47 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

	Yes	No
47		

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		
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49a Did the organization make any transfers to an exempt non-charitable related organization?

49a		
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b If "Yes," was the related organization a section 527 organization?

49b		
------------	--	--

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

(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

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

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

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

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

Signature of officer

Date

Jay D. Ahrens, V.P./Treasurer

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

Firm's name

Firm's EIN

Firm's address

Phone no

May the IRS discuss this return with the preparer shown above? See instructions

☐ Yes ☐ No

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

2012

**Open to Public
Inspection**

Name of the organization

KIWANIS CLUB OF SKIDAWAY

Employer identification number

58 1881459

Part I Fund Raising: \$122699. See attached supplement to Schedule O for specific event and revenue

Part I(8) Other Revenue: Weekly Club Meetings: \$2,012

Part I(10) Grants: \$85510 See attached supplement to Schedule O for specific names and amounts

Part I(16) Expenses - Service Fund Raising Expenses: \$37046. See attached supplement to Schedule O for specific amounts

Part I(16) Expenses - Club Operations: \$20297. See attached supplement to Schedule O for specific amounts.

Part III Statement of Program Service Accomplishments. See attached supplement to Schedule O for services rendered.

Part IV List of Officers and Directors See attached supplement to Schedule O for complete listing.

KIWANIS CLUB OF SKIDAWAY: 2012 Tax Year 990-EZ Part I(1)

Statement of Functional Revenue (Fund Raising Activity)

<u>Event</u>	<u>Revenue</u>
Chili Cookoff	\$ 19,485.00
Concert on the Green	\$ 31,212.00
Flag Program	\$ 12,850.00
Kids - TACK	\$ 12,975.00
Kiwanis Sponsors	\$ 24,450.00
Legends Golf	\$ 5,000.00
Other Voluntary	\$ 423.00
Pancake Breakfast	<u>\$ 16,304.00</u>
 Total	 \$ 122,699.00

KIWANIS CLUB OF SKIDAWAY: 2012 Tax Year 990-EZ Part I(8)

Statement of Other Income & Expense - Club Operations

<u>Function</u>	<u>Revenue</u>	<u>Expense</u>	<u>Net Revenue</u>
Breakfast Meetings:			
Breakfasts	\$ 1,512.00	\$ 2,140.00	\$ (628.00)
Fifty/Fifty	<u>\$ 3,952.00</u>	<u>\$ 1,312.00</u>	<u>\$ 2,640.00</u>
	\$ 5,464.00	\$ 3,452.00	\$ 2,012.00

KIWANIS CLUB OF SKIDAWAY: 2012 Tax Year 990-EZ

Part I (10) Grants

Georgia District:

Auditory Verbal Center	\$ 650.00
Tomorrow's Leaders	\$ 260.00
Key Leader	\$ 260.00
GA District Foundation	\$ 390.00
Kiwanis International Foundation	\$ 1,650.00

Total: \$ 3,210.00

Savannah Local Charities:

Americas 2nd Harvest	\$ 2,000.00
Bethesda Home for Boys	\$ 5,000.00
CASA	\$ 1,000.00
Childhood Cancer Family Support	\$ 2,000.00
Coastal Child Advocacy	\$ 3,000.00
Communities in Schools-Savannah	\$ 1,500.00
Circle K of AASU	\$ 500.00
Dollars for Doers	\$ 1,800.00
Greenbriar Children's Center	\$ 5,000.00
Horizons at Sav. Country Day	\$ 3,000.00
Horse'n Around	\$ 3,000.00
Interfaith Hospitality Center	\$ 4,000.00
Junior Achievement	\$ 3,000.00
Kid's Café	\$ 5,000.00
L.O.V.E.	\$ 2,000.00
Music Medicine Institute	\$ 2,000.00
Park Place Outreach	\$ 4,500.00
Pathway Counseling Center	\$ 1,500.00
Performance Initiatives	\$ 1,500.00
Sav. Early Childhood Development	\$ 8,000.00
Savannah Friends of Music	\$ 1,500.00
Social Apostolate	\$ 4,000.00
Special Olympics	\$ 9,000.00
Westley Community Center	\$ 1,500.00
West Broad St. YMCA	\$ 2,000.00
Youth Challenge Academy	\$ 5,000.00

Total: \$ 82,300.00

TOTAL: \$ 85,510.00

KIWANIS CLUB OF SKIDAWAY: 2012 Tax Year - IRS Form 990-EZ Part I(16)

Statement of Functional Expenses - Service Fund Raising

<u>Event</u>	<u>Supplies</u>	<u>Postage</u>	<u>Rental/Staging</u>	<u>Printing</u>	<u>Insurance</u>	<u>Entertainment</u>	<u>Misc./Adv.</u>	<u>TOTAL</u>
Chili Cook-Off	\$ 1,175.00	\$ -	\$ 2,640.00	\$ 1,380.00	\$ -	\$ 1,219.00	\$ 817.00	\$ 7,231.00
Concert	\$ 5,493.00	\$ -	\$ 4,212.00	\$ 905.00	\$ -	\$ 3,300.00	\$ 2,238.00	\$ 16,148.00
Flag Program	\$ 546.00	\$ -	\$ -	\$ 2,827.00	\$ -	\$ -	\$ -	\$ 3,373.00
Kiwanis Sponsors	\$ -	\$ -	\$ -	\$ 1,396.00	\$ -	\$ -	\$ -	\$ 1,396.00
Kids - TACK	\$ -	\$ -	\$ -	\$ 314.00	\$ -	\$ 1,500.00	\$ -	\$ 1,814.00
Pancake Breakfast	\$ 2,696.00	\$ -	\$ -	\$ 633.00	\$ -	\$ 235.00	\$ 1,190.00	\$ 4,754.00
Other Exp.	\$ -	\$ 178.00	\$ -	\$ 94.00	\$ 1,560.00	\$ -	\$ 498.00	\$ 2,330.00
Total	\$ 9,910.00	\$ 178.00	\$ 6,852.00	\$ 7,549.00	\$ 1,560.00	\$ 6,254.00	\$ 4,743.00	\$ 37,046.00

KIWANIS CLUB OF SKIDAWAY: 2012 Tax Year - Form 990-EZ Part I(16)

Statement of Functional Expenses - Club Operations

Kiwanis Club Operations	
Weekly Meetings	\$ 3,479.00
Corporate Registration	30.00
District Meetings	792.00
International Meetings	-
Liability Ins. (D/O)	250.00
Lt. Governor Expenses	465.00
Pins & Awards	304.00
Web Site/ Tele. Alert Service	832.00
Storage	125.00
New Member Recruiting	-
Bank Service Charge	24.00
Miscellaneous	-
Total	\$ 6,301.00

Kiwanis Dues	
Georgia District	\$ 4,220.00
Kiwanis International	\$ 8,046.00
Total	\$ 12,266.00

Kiwanis Club Supplies	
Computing	\$ 440.00
Printing	356.00
Administration/Support	934.00
Total	\$ 1,730.00

TOTAL EXPENSES \$ 20,297.00

KIWANIS CLUB OF SKIDAWAY: 2012 Tax Year 990-EZ

Part III. Statement of Program Service Accomplishments

SERVICES RENDERED BY THE CLUB

<u>Community Service</u>	<u>Service Hours</u>	<u>Kiwanians Involved</u>	<u>Children Served Directly</u>
1. BACKPACK BUDDIES	100	5	50
2. CHILD CANCER FAM. SUP.	30	1	200
3. HABITAT FOR HUMANITY	500	5	20
4. INTERFAITH HOSPITAL	360	4	50
5. KID'S CAFÉ	500	4	150
6. L.O.V.E.	55	1	11
7. MUSIC MEDICINE INSTITUTE	150	2	10
8. MEDIATION CENTER	250	12	130
9. RED CROSS BLOOD DRIVE	120	5	50
10. SAVANNAH FRIENDS OF MUSIC	80	1	50
11. SALVATION ARMY	144	10	600
12. VILLAGE LIBRARY	1300	10	100
 <u>Youth Services</u>			
1. BETHESDA BOYS HOME	900	7	130
2. CASA	600	5	30
3. CHILDREN'S ADVOCACY CTR.	60	1	200
4. EARLY CHILDHOOD EDUC.	180	2	100
5. CHILDREN'S FISHING TOURN.	65	8	30
6. FIRST TEE OF SAVANNAH	48	2	15
7. GREENBRIAR	50	1	10
8. HORIZONS SAVANNAH	50	2	10
9. HORSE'N AROUND	48	1	35
10. JUNIOR ACHIEVEMENT	100	4	300
11. MIGHTY EIGHTH MUSEUM	144	2	1000
12. NOTRE ACADEMY	140	1	150
13. PARK PLACE OUTREACH	720	4	90
14. ROCK GROUP	24	2	900
15. SOCIAL APOSTOLATE	650	5	415
16. SPECIAL OLYMPICS	396	10	110
17. YOUTH CHALLENGE ACDMY.	216	4	1200

KIWANIS CLUB OF SKIDAWAY: 2012 Tax Year - Form 990-EZ**Part IV**

<u>Name and Address</u>	<u>Title and Avg. Hrs/Wk</u>	<u>Compensation</u>	<u>Contr. To Emp. Benefits Plan & Def. Comp.</u>	<u>Exp. Acct. & Other Allowance</u>
Daniel C Umbel 2 Turtle Lane Savannah, GA 31411	President 4 Hrs	0	0	
Gregory T. Stinson 23 Wiley Bottom Road Savannah, GA 31411	Past President 4 Hrs.	0	0	0
Melissa M Emery 43 Cotton Crossing West Savannah, GA 31411	President Elect 4 Hrs.	0	0	0
Ronald R Weber 9 Heartwood Court Savannah, GA 31411	V P / Secretary 6 Hrs.	0	0	0
Jay D Ahrens 3 Shagbark Lane Savannah, GA 31411	V P./Treasurer 6 Hrs	0	0	0
James R O'Malley 4 Shearwater Court Savannah, GA 31411	Director 2 Hrs.	0	0	0
Frank C. McCarthy 39 Southerland Rd. Savannah, GA 31411	Director 2 Hrs	0	0	0
Jeffrey Heeder 3 Priber Lane Savannah, GA 31411	Director 2 Hrs.	0	0	0
Gary Hughes 19 Little Comfort Rd Savannah, GA 31411	Director 2 Hrs.	0	0	0
W. James Overton 7 Heatherstone Lane Savannah, GA 31411	Director 2 Hrs.	0	0	0
Thomas B Sayers 1 Flying Jib Lane Savannah, GA 31411	Director 2 Hrs	0	0	0
Bob Norton 5 Turtle Lane Savannah, GA 31411	Director 2 Hrs	0	0	0

<u>Name and Address</u>	<u>Title and Avg. Hrs/Wk</u>	<u>Compensation</u>	<u>Contr. To Emp. Benefits Plan & Def. Comp.</u>	<u>Exp. Acct. & Other Allowance</u>
Joyce Glenn 2 Crape Myrtle Ct. Savannah, GA 31411	Director 2 Hrs.	0	0	0
Frank Liebgott 38 Shellwind Dr Savannah, GA 31411	Director 2 Hrs	0	0	0
Thomas M Sharp 6 Sedgewater Lane Savannah, GA 31411	Board Advisor 4 Hrs	0	0	0