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Form 990-EZDepartment of the Treasury
Internal Revenue Service**Short Form
Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-1150

2013Open to Public
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- Do not enter Social Security numbers on this form as it may be made public.
- Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A For the 2013 calendar year, or tax year beginning

July 1, 2013, and ending June 30, 2014

B Check if applicable:

- Address change
- Name change
- Initial return
- Terminated
- Amended return
- Application pending

C Name of organization**The Exchange Club of Savannah, INC**

Number and street (or P.O. box, if mail is not delivered to street address)

D Employer identification number**23-7256781**

Room/suite

P. O. Box 18585**E Telephone number****(912) 598-9744**

City or town, state or province, country, and ZIP or foreign postal code

Savannah, Georgia 31416**F Group Exemption****Number ► 1097****G Accounting Method:** Cash Accrual Other (specify) ►**I Website:** ►J Tax-exempt status (check only one) — 501(c)(3) 501(c) (4) (insert no.) 4947(a)(1) or 527**K Form of organization:** Corporation Trust Association Other

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, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ► \$ **65458****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 0
	2 Program service revenue including government fees and contracts	2 18000
	3 Membership dues and assessments	3 44321
	4 Investment income	4 1
	5a Gross amount from sale of assets other than inventory	5a 0
	b Less: cost or other basis and sales expenses	5b 0
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c 0
	6 Gaming and fundraising events	
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a 0
Net Assets SCANNED SEP 1 2 2014 Expenses	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 3136
	c Less: direct expenses from gaming and fundraising events	6c 51
	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d 3085
	7a Gross sales of inventory, less returns and allowances	7a 0
	b Less: cost of goods sold	7b 0
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c 0
	8 Other revenue (describe in Schedule O)	8 0
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9 65407
	10 Grants and similar amounts paid (list in Schedule O)	10 7507
Net Assets	11 Benefits paid to or for members	11 0
	12 Salaries, other compensation, and employee benefits	12 0
	13 Professional fees and other payments to independent contractors	13 0
	14 Occupancy, rent, utilities, and maintenance	14 3600
	15 Printing, publications, postage, and shipping	15 1070
	16 Other expenses (describe in Schedule O)	16 47394
	17 Total expenses. Add lines 10 through 16	17 59571
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 5836
	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 4703
	20 Other changes in net assets or fund balances (explain in Schedule O)	20 0
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21 10539

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 108421

Form 990-EZ (2013)

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

		(A) Beginning of year	(B) End of year
22 Cash, savings, and investments		10085	22 15281
23 Land and buildings		0	23 0
24 Other assets (describe in Schedule O)		0	24 0
25 Total assets		10085	25 15281
26 Total liabilities (describe in Schedule O)		5392	26 4742
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)		4703	27 10539

Part III Statement of Program Service Accomplishments (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? See Schedule O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

28 Awards recognition programs for Police, Firefighters, EMTs, Military, Students and outstanding community citizens			
(Grants \$ 7507) If this amount includes foreign grants, check here		► <input type="checkbox"/>	28a 7507
29			
(Grants \$) If this amount includes foreign grants, check here		► <input type="checkbox"/>	29a
30			
(Grants \$) If this amount includes foreign grants, check here		► <input type="checkbox"/>	30a
31 Other program services (describe in Schedule O)			
(Grants \$) If this amount includes foreign grants, check here		► <input type="checkbox"/>	31a
32 Total program service expenses (add lines 28a through 31a)		► <input type="checkbox"/>	32 7507

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Lum Purvis, President	20	0	0	0
Joe Gamble, Vice President	15	0	0	0
William E. Gardner, Secretary	15	0	0	0
Walter G. Day, Treasurer	15	0	0	0
Del Lamb, Past President	5	0	0	0
Ira Couey, Director	2	0	0	0
Irvin Levine, Director	2	0	0	0
Cecil Tootle, Director	2	0	0	0
Raleigh C. Ward, Director	2	0	0	0
Jason Ford, Director	2	0	0	0
Richard Glendye, Director	2	0	0	0
Jimmie Hart, Director	2	0	0	0

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 0	37b	✓
b Did the organization file Form 1120-POL for this year?	38a	✓
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?	38b	
b If "Yes," complete Schedule L, Part II and enter the total amount involved	39a	
39 Section 501(c)(7) organizations. Enter:	39b	
a Initiation fees and capital contributions included on line 9		
b Gross receipts, included on line 9, for public use of club facilities		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► ; section 4912 ► ; section 4955 ►	40b	✓
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		
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	40c	✓
41 List the states with which a copy of this return is filed ►		
42a The organization's books are in care of ► Walter G. Day Telephone no. ► (912) 599-9744 Located at ► 18 Hasleters Retreat, Savannah, Georgia ZIP + 4 ► 31411-3104	42b	✓
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.	42c	✓
c At any time during the calendar year, did the organization maintain an office outside the U.S.? 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	44a	✓
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	✓
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	44c	✓
c Did the organization receive any payments for indoor tanning services during the year?	44d	
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	45a	✓
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45b	✓
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)		

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

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

Yes **No**

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	47
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a
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."	

1 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 business address of each independent contractor	(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		Aug. 22, 2014
Signature of officer		Date
Walter G. Day, Treasurer		
Type or print name and title		

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> 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

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.
► Information about Schedule O (Form 990 or 990-EZ) and its Instructions is at www.irs.gov/form990.

OMB No. 1545-0047

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Name of the organization

The Exchange Club of Savannah, INC

Employer identification number

237256781**FORM 990-EZ, Part I, Line 10 Grants and similar amounts paid. Awards recognition program for Police, Firefighters, EMTS, Military, Students
and Outstanding Community Citizens** **\$ 7507****FORM 990-EZ Part I, Line 16 Other Expenses: Conferences, Conventions and Meetings** **\$ 2048****Food and meals** **34672****Memorials and gifts** **100****Club express expense** **492****Insurance** **397****Dues to National & Georgia District** **8800****Awards to members** **285****TOTAL (to line 16)** **47394****FORM 990-EZ, Part II, Line 28**

Total Liabilities	Description of Liabilities	Col (A)	Col(B)
	Grants Payable	2500	1500
	Deferred Revenue	2892	3242
	TOTAL LIABILITIES (to Line 26)	5392	4742

FORM 990-EZ, PART IV List of Officers, Directors

Col(a)	Col(b)	Col(c)	Col(d)	Col(e)
Chris Hafer, Director	2hrs	0	0	0
Billy Covington, Director	2hrs	0	0	0
Michael Lariscy, Director	2hrs	0	0	0
Aloysius Winters, Director	2hrs	0	0	0
Joseph R. Sullivan, Director	2hrs	0	0	0
Charles Whitfield, Director	2hrs	0	0	0

**FORM 990-EZ, Part III, What is the organization's primary exempt purpose? To promote active participation in the Programs of Service of the
National Exchange Club, its National Project, the Prevention of Child Abuse, and for the betterment of the community.****To exemplify the meaning of Exchange in a spirit of "Unity for Service"**

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Cat. No. 51056K

Schedule O (Form 990 or 990-EZ) (2013)