

2018

Open to Public
Inspection

Form 990-EZ

Short Form

Return of Organization Exempt From Income Tax

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

► Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990EZ for instructions and the latest information.Department of the Treasury
Internal Revenue Service

A For the 2018 calendar year, or tax year beginning

July 1, 2018, and ending June 30, 2019

B Check if applicable

Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization

The Exchange Club of Wythe

NATI

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

P.O. Box 8127

Room/suite

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

Hampton, VA 23666-8127

04

D Employer identification number

54-0898902

E Telephone number

(757) 869-8123

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: ►

J Tax-exempt status (check only one) — 501(c)(3) 501(c)(4) (insert no) 4947(a)(1) or 527K 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)) are \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$

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	5,258	2
	2 Program service revenue including government fees and contracts	2	0	
	3 Membership dues and assessments	3	11,941	
	4 Investment income	4	1,318	
	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	6d	29,021	
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	0	
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	62,183	
	c Less: direct expenses from gaming and fundraising events	6c	33,162	
	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	29,021	
	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	47,538	
	10 Grants and similar amounts paid (list in Schedule O)	10	36,407	
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	0	
	15 Printing, publications, postage, and shipping	15	377	
	16 Other expenses (describe in Schedule O)	16	15,791	
	17 Total expenses. Add lines 10 through 16	17	52,575	
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-5,037	
	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	67,767	
	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	62,730	

SCANNED NOV 16 2020

process org

594083

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	67,767	22
23	Land and buildings	0	23
24	Other assets (describe in Schedule O)	0	24
25	Total assets	67,767	25
26	Total liabilities (describe in Schedule O)	0	26
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	67,767	27
			62,730

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? _____

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.

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations, optional for others)

28	Service to Youth: Scholarships and Awards, Cash to 5 Students			
	(Grants \$ 10,000) If this amount includes foreign grants, check here ► <input type="checkbox"/>	28a	10,000	
29	Service to Community: Grantee, Christmas Baskets for 20 Families			
	(Grants \$ 2,508) If this amount includes foreign grants, check here ► <input type="checkbox"/>	29a	2,508	
30	Service to Community: Grantee, After Prom Party, Cash Grant to 4 High Schools			
	(Grants \$ 2,201) If this amount includes foreign grants, check here ► <input type="checkbox"/>	30a	2,201	
31	Other program services (describe in Schedule O)			
	(Grants \$ 21,698) If this amount includes foreign grants, check here ► <input type="checkbox"/>	31a	21,698	
32	Total program service expenses (add lines 28a through 31a)		32	36,407

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
Michael Schetting				
President	20	0	0	0
Philip Everhart				
President Elect	10	0	0	0
Amber Hodges				
Secretary	10	0	0	0
James Puckett				
Treasurer	10	0	0	0
Matthew Hartman				
Immediate Past President	10	0	0	0
David Dudek				
Director	1	0	0	0
Patrick Garvey				
Director	1	0	0	0
Roy Austin				
Director	1	0	0	0
Jose Inchausti				
Director	1	0	0	0
Vickie Servais				
Director	1	0	0	0
Lonnie Servais				
Director	1	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

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 Yes No
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 Yes No
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)? Yes No
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 Yes No
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 Yes No
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 Yes No
36 ✓

37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► **37a** Yes No
37b ✓

b Did the organization file Form 1120-POL for this year? Yes No
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? Yes No
38a ✓

b If "Yes," complete Schedule L, Part II and enter the total amount involved Yes No
38b

39 Section 501(c)(7) organizations. Enter: Yes No
39a

a Initiation fees and capital contributions included on line 9 Yes No
39b

b Gross receipts, included on line 9, for public use of club facilities Yes No
39b

40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► **40a** , section 4912 ► **40a** , section 4955 ► **40a** Yes No
40b ✓

b Section 501(c)(3), 501(c)(4), and 501(c)(29) 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 Yes No
40b ✓

c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 Yes No
40c

d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization Yes No
40c

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 Yes No
40e ✓

41 List the states with which a copy of this return is filed ► Yes No

42a The organization's books are in care of ► **James Puckett** Telephone no. ► **757-869-8123** Yes No
 Located at ► **6 Sea Cove Ct, Hampton, VA** ZIP + 4 ► **23669-1066** Yes No
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 ► Yes No
 See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Yes No
42c ✓

c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ► Yes No
42c ✓

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** Yes No

44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ Yes No
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 Yes No
44b ✓

c Did the organization receive any payments for indoor tanning services during the year? Yes No
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 Yes No
44d ✓

45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? Yes No
45a ✓

b 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 Yes No
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

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."		

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 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 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	<input type="text" value="James E Puckett"/> <div style="display: flex; justify-content: space-between;"> <div style="flex: 1;"> <small>Signature of officer</small> </div> <div style="flex: 1;"> <small>Date</small> </div> </div>	<input type="text" value="10 NOV 2020"/>
	<input type="text" value="James E Puckett, TREASURER"/> <small>Type or print name and title</small>	

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 G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 890, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 890-EZ, line 6a.

Department of the Treasury
Internal Revenue Service

- Attach to Form 990 or Form 990-EZ.
- Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2019

Open to Public
Inspection

Name of the organization

Employer identification number

The Exchange Club of Wythe

54-0898902

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a Mail solicitations e Solicitation of non-government grants
b Internet and email solicitations f Solicitation of government grants
c Phone solicitations g Special fundraising events
d In-person solicitations

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

2b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No		
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
Total					

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

	(a) Event #1 <u>Pancake Jamboree</u> (event type)	(b) Event #2 <u>Christmas Tree Sale</u> (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts . . .	11836	49600	61436
	2 Less: Contributions . . .	0	0	0
	3 Gross income (line 1 minus line 2)	11836	49600	61436
Direct Expenses	4 Cash prizes	0	0	0
	5 Noncash prizes	0	0	0
	6 Rent/facility costs	550	900	1450
	7 Food and beverages	1266	250	1516
	8 Entertainment	0	0	0
	9 Other direct expenses	677	21933	22610
	10 Direct expense summary. Add lines 4 through 9 in column (d)			25576
	11 Net income summary. Subtract line 10 from line 3, column (d)			35860

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue . . .			
Direct Expenses	2 Cash prizes			
	3 Noncash prizes			
	4 Rent/facility costs			
	5 Other direct expenses			
	6 Volunteer labor	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No
	7 Direct expense summary. Add lines 2 through 5 in column (d)			
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)			

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See Instructions.

Name of the organization

The Exchange Club of Wythe

Employer identification number

54-0898902

1. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Youth, Grantee: ACE Award, Cash Grant to 1 Youth: \$661
2. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Youth, Grantee: Scholarships, Cash Grant to 6 Individuals: \$10000
3. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Youth, Grantee: Youth of the Month & Youth of the Year Awards, Cash Grant to 6 Individuals: \$986
4. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Community, Grantee: After Prom Party, Cash Grant - 4 High Schools: \$2201
5. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Youth, Grantee: Youth Athletics, Cash Grant to a Youth Athletic Association & Sleep in Heavenly Peace, \$650
6. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Community, Grantee: Vet Support Groups, Cash Grant to 3 groups: \$991
7. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Americanism, Grantee: One Nation Under God: \$56
8. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Americanism, Grantee: New Freedom Shrine & Maintenance: \$1995
9. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Community, Grantee: Special Projects, Cash Grant: \$2191
10. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Community, Grantee: Book of Golden Deeds, Cash Grant: \$165
11. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Community, Grantee: Christmas Baskets - 20 Families, Cash Grant: \$2508
12. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Community, Grantee: Crime Prevention Banquet, Cash Grant: \$2660
13. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Community, Grantee: Fire Prevention Banquet, Cash Grant: \$1525
14. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Community, Grantee: Prevention of Child Abuse, Cash Grant: \$339
15. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Community, Grantee: Senior Citizen Activities, Cash Grant: \$700
16. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Community, Grantee: Sheriff's Appreciation Banquet, Cash Grant: \$508
17. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Community, Grantee: Mayor's Book Club, Cash Grant: \$880
18. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Community, Grantee: Start New Exchange Clubs, Cash Grant: \$300
19. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Community, Grantee: Publicity: \$300
20. Form 990-EZ, Part III, Line 10, Grants Paid: Activity: Service to Community, Grantee: NEC Foundation, Cash Grant: \$1000
21. Form 990-EZ, Part III, Line 16, Other Expenses: Supplies: \$20
22. Form 990-EZ, Part III, Line 16, Other Expenses: Direct Fund Raising : \$390
23. Form 990-EZ, Part III, Line 16, Other Expenses: Misc Expenses (Fees, Ramps, PO Box, Etc.): \$2265

Name of the organization

The Exchange Club of Wythe

Employer identification number

54-0898902**24. Form 990-EZ, Part III, Line 16, Other Expenses: National and District Dues: \$3302****25. Form 990-EZ, Part III, Line 16, Other Expenses: Conferences, Conventions and Meetings: \$9814**