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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 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.

OMB No 1545-1150

2011

Department of the Treasury Internal Revenue Service

Open to Public 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 Inspection

A F	or the	2011 calenda	ar year, or tax year beginning	, 2011, an	d ending			, 20
Во	Check if ap	plicable	C Name of organization			D Emplo	yer ide	ntification number
A	Address ch	ange	COAST OF CAROLINA PARROTHEAD CLUB			57-	-1106	289
□ N	lame char	nge	Number and street (or PO box, if mail is not delivered to street address)		Room/suite	E Telepho	one nu	mber
tr	nitial return	n						
Πī	erminated	ı	P O BOX 14714			(84	13) 65	0-0782
	mended r	eturn	City or town state or country, and ZIP + 4			F Group		
ΠĀ	Application	pending	Myrtle Beach, SC 29587			Numbe		
G	Accoun	iting Method	X Cash ☐ Accrual Other (specify)		Н			he organization is not
			COFCPHC.COM		``			Schedule B
			check only one) - 501(c)(3)	4947(a)(1) c	r 527	•		Z, or 990-PF)
			rganization is not a section 509(a)(3) supporting organization of					
			00 A Form 990-EZ or Form 990 return is not required though F					
			ses to file a return, be sure to file a complete return	555 11	(0 pootoara)	may be requ		se matruettona, But n
			7b, to line 9 to determine gross receipts. If gross receipts are	\$200,000 c	or more or if to	ntal assets (I	Part II	
			elow) are \$500,000 or more, file Form 990 instead of Form 990					28,826
	rt I		e, Expenses, and Changes in Net Assets or Fu					
ين.	<u></u> ,		ne organization used Schedule O to respond to any question in					
	1	Contribution	s, gifts, grants, and similar amounts received	T till 5 T talt 1	• • • • • •	· · · · · ·	4	X
	2		vice revenue including government fees and contracts				2	
	3		dues and assessments				3	3,847
	4	Investment i						3,647
	· ·		ncome			• • • • •	4	
			r other basis and sales expenses					
	I		s) from sale of assets other than inventory (Subtract line 5b fro	ım iine sa)	• • • • • •	• • • • • •	5c ∤	
R		_	fundraising events					
e v	"		ne from gaming (attach Schedule G if greater than	. ا	1		3	
e n	[<u>6</u> a				
u			ne from fundraising events (not including \$		of contributio	ns		
е	ļ		sing events reported on line 1) (attach Schedule G if the	1	1			
			gross income and contributions exceeds \$15,000)			24,877	*	
			expenses from gaming and fundraising events			17,710		
	a		or (loss) from gaming and fundraising events (add lines 6a and		ibtract			
							6d	7,167
\approx			of inventory, less returns and allowances V					
2012		Less cost o	111111111111111111111111111111111111111					
((3)	°	Gross profit	or (loss) from sales of intentory (Subtract line 7b from the 7a)			• • • • • •	7c	
(8	Other reveni	ue (describe in Schedule 8) JUL 3 0 2012 00 10 10 10 10 10 10 10 10 10 10 10 10	• • • • •	• • • • • • •		8	76
9_	9	lotal reven	ue. Add lines 1, 2, 3, 4, 50, 6d, /c, and 8	• • • • •	· · · · · · · ·	<u> ▶</u>	9	11,116
AUG 	10	Grants and	similar amounts paid (list in Schedule 0)	• • • • •	• • • • • •	• • • • •	10	7,975
	11	Delicits par	d to or for interribers	• • • • •			11	
版 X	12		ner compensation, and employee benefits				12	
茎 e	13		I fees and other payments to independent contractors	• • • • •			13	250
DENNING Experse	14		rent, utilities, and maintenance				14	
OSUNVOS	15		olications, postage, and shipping				15	266
	16	•	ses (describe in Schedule O)				16	1,901
	17		ses. Add lines 10 through 16	<u></u>	<u></u> .	▶	17	10,392
A	18	Excess or (d	deficit) for the year (Subtract line 17 from line 9)				18	724
A Ns e e t	19	Net assets of	or fund balances at beginning of year (from line 27, column (A)) (must agr	ee with			
e e		end-of-year	figure reported on prior year's return)				19	3,331
ťť	20	Other chang	es in net assets or fund balances (explain in Schedule O) .				20	
S	21	Net assets of	or fund balances at end of year Combine lines 18 through 20			▶	21	4,055
For	Paperv	vork Reduct	ion Act Notice, see the separate instructions.		EEA			Form 990-EZ (2011)

Part II Balance Sheets. (see the instructions	for Part II)				
Check if the organization used Schedule (O to respond to any question in this F	Part II	• • • • • • • • • • • • • • • • • • •		
•		(A) Be	ginning of year		(B) End of year
22 Cash, savings, and investments			3,331	22	4,055
23 Land and buildings			0	23	0
24 Other assets (describe in Schedule O)			0	24	0
25 Total assets			3,331	25	4,055
26 Total liabilities (describe in Schedule O)			0	26	
27 Net assets or fund balances (line 27 of column (E			3,331	27	4,055
Part III Statement of Program Service			I)		Expenses
Check if the organization used Schedule				(Re	quired for section
What is the organization's primary exempt purpose? So			<u> </u>	501	(c)(3) and 501(c)(4)
					anizations and sectio
Describe the organization's program service accomplis as measured by expenses. In a clear and concise man	•	•		_	7(a)(1) trusts, option
persons benefited, and other relevant information for ea		the fluttiber of			others)
28 CHARTIABLE DONATIONS		· · · · ·		-	1
				İ	
(Grants \$) If	this amount includes foreign grants, o	check here		28a	7,97
29	and amount molecos foreign grants,	oncok nore	····	-00	
				•	
					
(Grants \$) If	this amount includes foreign grants,	chack hare		 29a	
30	tins amount includes loreign grants, t	CHECK HEIE		230	'
30					
				Ì	}
(Cranto 6	this amount includes favores are to	-hl- h		20-	
	this amount includes foreign grants,		· · · · · · · · · · · · · · · · · · ·	30a	<u> </u>
31 Other program services (describe in Schedule O)			• • • • • • • • • • • • • • • • • • • •	24-	
	this amount includes foreign grants,			31a	
32 Total program service expenses (add lines 28a t				32	
Part IV. List of Officers, Directors, Trustees, a	* · · ·	•	•		·
Check if the organization used Schedule	O to respond to any question in this		1 -		· · · · · · · · · · · · · · · · · · ·
	(b) Title and average	(c) Reportable compensation	(d) Health benefits contributions to emp		(e) Estimated amount of
(a) Name and address	hours per week	(Form W-2/1099-MISC)	benefit plans, and		other compensation
	devoted to position	(if not paid, enter -0-)	deferred compensa	tion	
BOB HALL	TREASURER				i _
P O BOX 14714, Myrtle Beach SC 29587			9	9	0
JOEL SPILLANE	PRESIDENT				
P O BOX 14714, Myrtle Beach SC 29587			9	9	0
JUDY ADAMS	VICE PRESIDENT		i		
P O BOX 14714, Myrtle Beach SC 29587			9	q	0
BRENDA JACKSON	SECRETARY				
P O BOX 14714, Myrtle Beach SC 29587	0		<u> </u>	q	0
			}		1
			ì		
			T		
	-				
			+		
		 	 -		
			1		
		EEA	<u> </u>		Form 990-EZ (201

Job 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 detailed description of each activity in Schedule O detailed description of each activity in Schedule O description of each activity in Schedule O description of each activity in Schedule O (see institutions) do yet the amended documents if they reflect a change to the organization are institutions of the organization and institution organization and institutions of the organization and institution organization and institutions organization and institutions or an analysis of Schedule N and the organization and institutions or an analysis of Schedule N and the organization brown of nor or make any bias to, any officer, director, fundere, or key employee or were any such losins made in a prior year and still outstanding at the end of the tax year covered by this return? 38 Did the organization brown of nor or make any bias to, any officer, director, fundere, or key employee or were any such losins made in a prior year and alto outstanding at the end of the tax year covered by this return? 39 Section 501c(7) organizations. Enter an organization organization organization organization and prior year and the organization	Гаі	A 1 C D. CO Obsolutifity assessment and Cabad I O. Constitution of D. Co			
33 Dut the organization engage in any significant activity not previously reported to the IRSP If "Tes," provide a defailed description of each activity in Schedule O, 20 viver any significant changes made to the organizating of poverning documents 9 if "Yes," attach a conformed copy of the amended documents in they reflect a change to the organization in amen Otherwise, explain the change on Schedule O, (see natiructions). 3 Duff the organization have contrasted theoriess goes income of \$1,000 or more during the year from business a children (such as those reported on lines 2, 5a, and 7a. among others)? 3 If "Yes," to line 35a, has the organization lined a From 990 17 for the year? If No, provide an explanation in Schedule O. 35b X. 3 If "Yes," to line 35a, has the organization lined a From 990 EV or for the year? If No, provide an explanation in Schedule O. 35b X. 3 If "Yes," and provy tax requirements during the year? If "Yes," complete Schedule C, Part till using the year? If "Yes," complete applicable parts of Schedule N. 3 If "Enter amount of political expenditures, direct or indiced, as described in the instructions. 3 If a Enter amount of political expenditures, direct or indiced, as described in the instructions. 3 If a Enter amount of political expenditures, direct or indiced, as described in the instructions. 3 If "Yes," complete Schedule, I part If and enter the total amount minutes or key employee or ware any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 3 If "Yes," complete Schedule, I part If and end enter total amount minutes or key employee or ware any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 3 If "Yes," Expenditures or the organization of the still outstanding at the end of the tax year covered by this return? 3 If "Yes," If "Yes," Complete Form 388 Inter amount of tax exposed on the organization engage any any section 4955 ≥ 25con 501(c)(3) and 501(c)(4) organ		instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V		Voc	No
detailed description of each activity in Schedule O Were any significant changes and to the organization of 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) 35 a Did the organization have urrelated 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)? 5 if "Yes, to line 35a, has the organization filed a Form 890-T for the year? If "No, provide an explaination in Schedule (O see intermediation of year) and the second state of years and the years and years and the years and ye	22	Old the organization engage in any significant activity not previously reported to the IRS2 If "Vec." provide a		163	140
34 Were any significant changes made to the organizary or governing documents? If Yes,* attach a conformed copy of the simended documents if they reflect a change to the organization is name. Otherwise, explain the change on Schedule O (see instructions) 35 ab 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)? 35 b If Yes,** I loan 55, his path cognization fleet a Fram 990-T for the year? If Yes,* complete Schedule O. 35 b If Yes,** I loan 55, his path cognization fleet a Fram 990-T for the year? If Yes,* complete Schedule C, Part III or governments during the year? If Yes,* complete Schedule C, Part III or governments during the year? If Yes,* complete Schedule C, Part III or governments during the year? If Yes,* complete splicable parts of Schedule N 36 b Id the organization and the form 1120-POL for the year? 37 a Enter amount of policial capendities, direct or indirect, as described in the instructions 38 b Id the organization brown from or make any brace to, any officer, director, trustee, or key employee or were any such ilians made in a prior year and still outstanding at the end of the tax year covered by this setum? 38 b If Yes,* complete Schedule I, Part II and enter the total amount minorities of the tax year covered by this setum? 39 Section 501(c)(7) organizations Enter amount of tax miposed on the organization during the year of a Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax miposed on the organization during the year of the section 4911 P. 30 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c rembusised by the organization and party to a prohibited tax sheller transaction of If Yes,* complete form 888-T. 40 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c rembusised by the organization and the transpead on the organization aparty to a prohibited tax sheller reported on any of this	93		,,		17
copy of the amended documents if they reflect a change to the organization same Otherwise, explain the change on Schedule O (see instructions) 5a D dit the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2.6 a. and 7a, aming others?) 5 if "Yes," to line 35a, has the organization filed a Form 950. To fit the year? if "No," provide an explaination in Schedule O 35b X 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 lax requirements during the year? if "Yes," complete Schedule C, Part III a 35c X 2 during the year? if "Yes," complete applicable pairs of Schedule N 2 and the organization undergo a isquidation, dissolution, termination, or significant disposition of reflax assets during the year? if "Yes," complete applicable pairs of Schedule N 2 and the organization file Form 112P-CDL for this year? 7a a Inter amount of policical expenditures, direct or indirect, as described in the instructions	24		33		
change on Schedule O (see instructions) 3a Dit the organization have uncertailed bissuess 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)? b If "Fes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O (35b X). C Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), organization subsction 6033(e) notice. The proving, and proxy tax requirements of 501(c)(4), 501(c)(6), organization subsction 6033(e) notice. The proving and proxy tax requirements of 501(c)(4), 501(c)(6), organization subsction 6033(e) notice. The proving and proxy tax requirements of 501(c)(4), 501(c)(6), organization subsction 6033(e) notice. The proving and proxy tax requirements of 501(c)(4), 501(c)(6), organization subsction 6033(e) notice. The proving and proxy tax requirements of 501(c)(4), organization or significant disposition of respiration for the service of the section 403(e), 437 and 501	34				
35 a 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 2.6 a, and 7.a, among others?) b if "Res," to line 35a, has the organization filed a Form 950-1 for the year? if Yno," provide an explanation in Schedule 0 C Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), or 501(c)(6), organization subject to section 603(a) notice, reporting, and proxy tax requirements during the year? if "Res," complete Schedule C, Part III and 1.2 and			ا ا		
sativities (such as those reported on lines 2, 6a, and 7a, among others)? b If 19*es, * to time 35a, has the organization filed of more 90-15 for the year? If 190,* provide an explanation in Schedule O c Was the organization a section 501c(i/s), 501c(i/s), or 501c(i/s) for ganization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 19*es, "complete Schedule C, Part III Did the organization undergo a laquidation, dissolution, termination, or significant disposition of net assets during the year? If 19*es, "complete applicable parts of Schedule N 37a Einter amount of political expenditures, direct or indirect, as described in the instructions 37b Did the organization file Form 1120-PCL for this year? 38 Did the organization file Form 1120-PCL for this year? 38 Did the organization brown from, or make any locates, as described in the instructions b Did the organization brown from, or make any locates, as described in the instructions b Did the organization brown from, or make any locates, as described in the instructions b Did the organization brown from, or make any locates, as described in the instructions b If 19*es, "complete Schedule I, Part I I and enter the total amount involved b If 19*es, "complete Schedule I, Part I I and enter the total amount involved b Corosa recepts, included on line 9, for public use of club facilities section 4910 section 49			34		<u> X</u>
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 X c Was the organization of Schi(c)(5), 50 501(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 X 35 Did the organization undergo a liquidation, dissolution, termination, or significant disposation of rel assets during the year? If "Tes," complete Schedule C, Part III 35c X 37 a Enter amount of political expenditures, direct or indirect, as described in the instructions	35 a				
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 "Fes," complete Schedule C, Part III 356 X and proxy tax requirements during the year? If "Fes," complete spending to right or original to the comparization of political expenditures, direct or indirect, as described in the instructions 36			\vdash	<u> X</u>	
reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 35C	b		35b		<u> X</u>
35 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the yea?" If "Yes," complete applicable parts of Schedule N	C				
during the year? If "Yes," complete applicable parts of Schedule N 3 a Enter amount of political expenditures, direct or indirect, as described in the instructions b Did the organization file Form 1120-PCL for this year? 3 a Dot the organization borrow from, or make any leans to, any officer, director, trustice, or key employee or were any such loans made in a pinor year and still outstanding at the end of the tax year covered by this return? 3 b If "Yes," complete Schedule I., Part II and enter the total amount involved 3 section 501(c)(7) organizations Enter a initiation fees and capital contributions included on line 9 5 Gross receipts, included on line 9, for public use of club facilities a initiation fees and capital contributions included on line 9 5 Section 501(c)(3) organizations Enter amount of fax imposed on the organization during the year under section 4911 ▶ section 4912 ▶ section 4955 ▶ 5 Section 501(c)(3) and 501(c)(4) organizations b Did the organization engage in any section 4955 ▶ 5 Section 501(c)(3) and 501(c)(4) organizations b Did the organization engage in any section 4955 ▶ 5 Section 501(c)(3) and 501(c)(4) organizations b Did the organization in a prior year that has not been reported on any of its prior forms 990 or 990 EZE If "Yes," complete Schedule I., Part I 40 c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax minosed 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 rembursed 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 8885-T. 40 If the organization organization are care of ₱ BOB INALL 10 Located at ₱ P O BOX 1714 Myrt-UB Beach, SC 21 The organization form of the foreign country ▶ See the instructions for exceptions and filing requirements for Form 10 F 90-22.1, Report of Foreign Bank and Financial		reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
37a Inter amount of political expenditures, direct or indirect, as described in the instructions 37a	36				1
b Did the organization file Form 1128-POL for this year? a Did the organization form of make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstending at the end of the tax year covered by this return? b If "Yes", complete Schedule I, Part II and enter the total amount involved 38b 38b 30 38b 38b 30 38b 38b 30 38b 38b 30 38b 30 38b 30 38b 30 30 38b 30 30 30 30 30 30 30 3			36		Χ
38 a Dol 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? b If "Yes," complete Schedule I. Part II and enter the total amount involved 38b Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on line 9. 39a 0 b Gross receipts, included on line 9, for public use of ollub facilities 19b Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ★ section 4915 ★ section 4916 ★ sec	37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions > 37a			
any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? If "Yes," complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations Enter Initiation fees and capital contributions included on line 9 Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 Section 501(c)(4) organizations Did the organization engage in any section 4955 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 excess benefit transaction during the year, or did it engage in an excess benefit transaction any of its prior forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 40b 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 886-T Located at P P 0 80X 14714 Myrttle Beach, SC ZIP+ 4 29587 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 accountly? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form 10 F 90-22.1, Report of Foreign Bank and Financial Accounts. At a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ Ob the organization organization organization financial provided organization organization organization organizatio	b	Did the organization file Form 1120-POL for this year?	37b		X
b If "Yes," complete Schedule I., Part II and enter the total amount involved 3 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on line 9. b Gross receipts, included on line 9 for public use of club facilities 3 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956 excess benefit transaction during the year, or did it engage in an excess benefit transaction during the year under section 4911 c Section 501(c)(3) and 501(c)(4) organizations. Did the organization in a prior year that has not been reported on any of its prior Forms 990 or 990-E27 If "Yes," complete Schedule I., 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. 42 a The organization's books are in care of ▶ BOB HALL Located at ▶ P O BOX 14714 My**T1e Beach, SC 2IP+4 22587 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 y such a signal party of the section of the U S? If "Yes," enter the name of the foreign country > See the instructions for exceptions and fling requirements for Form TD F 90-221, Report of Foreign Bank and Financial Accounts. 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 > See the instructions for exceptions and fling requirements for Form TD F 90-221, Report of Foreign Bank and Financial Accounts. At any t	38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
39 Section 501(c)(7) organizations Enter a initiation fees and capital contributions included on line 9 b Gross recepts, included on line 9, for public use of club facilities 39b 0 40 a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 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 during the year, or did it engage in an excess benefit transaction on any of its prior Forms 990 or 990-E-Z* If Yes," complete Schedule L, Part 1 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 886-T. List the states with which a copy of this return is filed ▶ 10 A any time during the calendar year, did the organization have an interest in or a signature or other authonty over a financial account in a foregin country (such as a bank account, securities account, or other financial accounts? If "Yes," enter the name of the foregin country Section 4947(a)(1) nonexempt chantable trusts filing Form 990-EZ in lieu of Form 1041-Check here and enter the amount of tax-receptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. A 10 dit the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ b Old the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ c Did the organization oreceive any payment from orenage in any tran		any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		Х
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		Form 990-EZ (see instructions)	45b		X

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mplete Declaration of preparer (other than officer) is	s based on all information of which preparer has	any knowledge		
Signature of officer BOB HALL, TREASURER	2		Date ///	
	I D			1=
Print/Type preparer's name	Preparer's ingriature	Date	Check if	PTIN
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Firm's name W HERBERT HUCKS	3		Firm's EIN	
Firm's address 1010 5TH AVE NO	ORTH SUITE 105			
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scuss this return with the preparer show	n above? See Instructions		`	Yes No
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	rjury, I declare that I have examined this return, included in the property of	ripry, I declare that I have examined this return, including accompanying schedules and statements implete. Declaration of preparer (other than officer) is based on all information of which preparer has signature of officer. BOB HALL, TREASURER Type or print name and title Print/Type preparer's name Preparer's algorature W HERBERT HUCKS	riplete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge BOB HALL, TREASURER Type or print name and title Preparer's name Preparer's name W HERBERT HUCKS Firm's name W HERBERT HUCKS Firm's address 1010 5TH AVE NORTH SUITE 105 SURFSIDE BEACH SC 29575 Cluss this return with the preparer shown above? See Instructions	Signature of oftiger BOB HALL, TREASURER Type or print name and title Preparer's rignature Obert Hanna Obert Hanna W HERBERT HUCKS Firm's address 1010 5TH AVE NORTH SUITE 105 SURFSIDE BEACH SC 29575 Cluss this return with the preparer shown above? See Instructions

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities
Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, Irine 6a.

Attach to Form 990 or Form 990-EZ. See separate instructions

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

Employer identification number

Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Internet and email solicitations f Solicitation of government grants Phone solicitations g Special fundraising events In-person solicitations 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 If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization	Form 990-EZ filers are not required to complete this part	AST OF CAROLINA PA					57-1	L106289
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	řt II					8, or reported more
		than \$15,000 of fundraising		nd gross income on Form	990-EZ, lines 1 and	6b List events with
	•	gross receipts greater than	\$5,000 (a) Event #1 TBSBP	(b) Event #2	(c) Other events	(d) Total events Add col (a) through
R			(event type)	(event type)	(total number)	col (c))
e v e n	1	Gross receipts	15,663			15,663
u e	3	Less Charitable contributions				
	_	line 2)	15,663			15,663
D	4	Cash prizes				
r e	5	Noncash prizes	1,365			1,365
c t	6	Rent/facility costs				
Ε χ ρ	7	Food and beverages	1,803			1,803
e n s	8	Entertainment,	3,400		· · · · · · · · · · · · · · · · · · ·	3,400
e s	9	Other direct expenses	893			893
	10	Direct expense summary Add line				
ΓPa	11 Irt II	Net income summary Combine lin Gaming, Complete if the	organization answered	1 "Yes" to Form 990 Part	IV line 19 or reporte	8,202
تستا		than \$15,000 on Form 990			,,	,
ี ผียวด<กฎ			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
cae a	1	Gross revenue		-		
-rect	2	Cash prizes,				
Ë	3					
Ď		Noncash prizes				
n S	4	Noncash prizes				
xpenses	4 5			☐ Yes %	Yes 9	6
beses		Rent/facility costs	☐ Yes %	☐ Yes % ☐ No	☐ Yes %	6
prises	5	Rent/facility costs	S 2 through 5 in column (c	No	□ No ▶	6
enses	6	Rent/facility costs	S 2 through 5 in column (c	No	□ No ▶	(
9	5 6 7 8 En	Rent/facility costs	s 2 through 5 in column (on the line 1, column d, and the line 1, colu	No No dine 7	□ No ►	()
9	5 6 7 8 En	Rent/facility costs	s 2 through 5 in column (or mbine line 1, column d, ar ation operates gaming activities in each	No No dine 7	□ No ►	()
9 a t	5 6 7 8 Ent	Property of the organization's gaming	No s 2 through 5 in column (or mbine line 1, column d, ar ation operates gaming action activities in each gaming activities in each licenses revoked, suspe	No Id line 7	No he tax year?	Yes No
9 a t	5 6 7 8 Ent	Property of the organization's gaming	No s 2 through 5 in column (or mbine line 1, column d, ar ation operates gaming action activities in each gaming activities in each licenses revoked, suspe	No d line 7	No he tax year?	Yes No

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

MEETING

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

Name of the organization Employer identification number COAST OF CAROLINA PARROTHEAD CLUB 57-1106289 01. Description of other revenue (Part I, line 8) Description Amount MERCHANDISE SALES 76 02. List of grants and similar amounts paid (Part I, line 10) Activity **VARIOUS VARIOUS** Grantee 2,812 Amount **Activity** ABUSED CHILDREN Grantee CHILDRENS RECOVERY CENTER Myrtle Beach SC 29588 5,163 Amount 03. Description of other expenses (Part I, line 16) Amount. Description 321 CREDIT CARD 212 TROPHIES STORAGE UNIT 40 MISCELLANEOUS 541 DUES AND SUBSCRIPTIONS 203 WEB SITE 70

514