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# **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)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

<u>A</u> _	For the	2011 cale	ndar year, or tax year beginning January 1 , 2011, and er	naing	December 31	, 20 11				
В	Check if	applicable	C Name of organization Women to the World, Inc.		D Emplo	yer identification number				
	Address	change	Doing Business As		58-1875414					
	Name ch	nange	Number and street (or P O box if mail is not delivered to street address) Room	E Teleph	none number					
	Initial reti	urn	1860 Barnett Shoals Rd	103, PMB	581	706-548-0000				
	Terminat	ed	City or town, state or country, and ZIP + 4							
	Amended	d return	Athens, GA 30605	<b>G</b> Gross	receipts \$					
	Applicati	on pending	F Name and address of principal officer Doris Aldrich, President	H(a	) Is this a group retu	m for affiliates? Yes Vo				
	, .		2950 Atlanta Hwy, Athens, GA 30606	H(b	) Are all affiliates	included? Yes No				
ī	Tax-exer	mpt status	✓ 501(c)(3)	7	If "No," attach	n a list (see instructions)				
J	Website	: > ww	w.womentotheworld.org	H(c	) Group exempt	on number >				
ĸ	Form of c	organization	✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of fo	rmation	1985 M Sta	te of legal domicile GA				
	art I	Summ								
	_	Briefly de	escribe the organization's mission or most significant activities: To	rescue wo	omen and chil	dren from poverty,				
_			ncy, and abuse; through education, entrepreneurial skills, and survival							
ဦ			alth and personal hygiene practices							
Activities & Governance					•••••					
Š	2	Check th	is box ▶☐ if the organization discontinued its operations or dispos	ed of more	e than 25% o	of its net assets.				
Ĝ	1									
Š	1		of independent voting members of the governing body (Part VI, line							
ij	1		mber of individuals employed in calendar year 2011 (Part V, line 2a)			1				
Ě	1		mber of volunteers (estimate if necessary)		6	50				
Ă					· —					
3	1		lated business taxable income from Form 990-T, line 34		7b					
,—	<del>                                     </del>	14Ct dine	lated business taxable income norm of our of the officers.		Prior Year	Current Year				
3	8	Contribu	tions and grants (Part VIII, line 1h)		20300	156953				
) j	1		<u> </u>	·						
Revenue	1	_	service revenue (Part VIII, line 2g)	<del>-</del>						
ڲۿ	1				-					
	L		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)... enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12	20300	156953					
	12			12289	<u> </u>					
くろう			nd similar amounts paid (Part IX, column (A), lines 1–3)	·	12203	117188				
<u> </u>	14		paid to or for members (Part IX, column (A), line 4)		2820	24000				
Expenses	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)	)	2020	24000				
500	16a		onal fundraising fees (Part IX, column (A), line 11e)	•		<del></del>				
ន្ត	_b		draising expenses (Part IX, column (D), line 25)							
_	1		penses (Part IX, column (A), lines 11a-11d, 11f-24e)	·	45400	444400				
	18	•	penses. Add lines 13-17 (must equal Part IX, column (A), line 25)	·	15109	<del></del>				
_	19	Revenue	less expenses. Subtract line 18 from line 12	5190 ng of Current Yes						
ts or				Beginnin						
Net Asset Fund Balan	20		sets (Part X, line 16)	·	18725	-				
Z E	21		bilities (Part X, line 26)	·	2222					
			ture Block	<u> </u>	16502	179956				
_	art II		ture block							
Ur	der pena	Ities of perju	ury, I declare that I have examined this return, including accompanying schedules and	statements,	and to the best of	of my knowledge and belief, it is				
	e, correct	t, and comp	lete Declaration of preparer (other than officer) is based on all information of which pre	parer rias arr	- T					
٠.		<b>                                     </b>	Allris X V frech			test of				
Sig	_	Sign	acture of officer		Date 😽	18/12				
He	ere	<b>                                     </b>				<del>-</del>				
		<del></del>	e or print name and title DURIS ALDRICH, PRESID							
Pa	nid	Print/Ty	pe preparer's name Preparer's signature	Date		k 🔲 if PTIN ·				
	epare	r		<u> </u>	self-e	mployed				
	se Onl		name 🕨		Firm's EIN	<u> </u>				
		Firm's a	address ►		Phone no					
Ma	y the IF	RS discus	s this return with the preparer shown above? (see instructions) .	<u> </u>	<u> </u>	Yes 🗌 No				
For	Paperv	vork Redu	iction Act Notice, see the separate instructions.	Cat No 1128	32Y	Form <b>990</b> (2011)				

Form	990	(2011)

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	, rage <b>L</b>
Part	
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	Rescuing women and children from poverty, dependency, and abuse by providing education, micro-business entrepreneurial skills,
	horticultural and agricultural skills, animal husbandry, water purification and conservation, health and personal hygiene
	care, infant mortality reduction, nutrition, trauma counseling and other developmental programs adequate to sustainable life enhancements through Literacy and other educational endeavors.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of
	grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 34137 including grants of \$ ) (Revenue \$ )
	Kenya. Organized women to for micro-business enterprise to provide econmic strength for themselves and their families.
	The initial raw materials were provided for each woman registered in the program. Business skills and instructions were provided by
	WTTW,including purchasing, marketing, inventory control, and money management. More than 360 women are enjoying the freedom of owning their own business, offering a service or product to their community, and providing for themselves and their
	families a source for nutrition, healthcare, and education for relatives within the household. These beneficiaries are all heads of
	households. Training in jewelry making and marketing has been the focus for economic strength for women heads of households.
	In the slums of Kenya, 155 orphans have been sponsored by Americans. These orphans were rescued from the streets, most HIV
	positive and have food, clothes, beds and beddings. Teachers are provided for street children in the Mathare/Barb Slum Disctricts.
	Rooms have been added to the school, with purified water, protein added to the barley mush, and protection for the girls. Vans
	were provided for field trips into the city of Nairobi, exposing the orphans to green space, live animals, and clean air. Additional
	rooms were added to the facility for protected sleeping compounds by both sexes. WTTW provides security for the girls.
	More than 1500 children were provided protein in the Mathare partner slum, a school organized by Johnson Wambua.
4b	(Code:) (Expenses \$26890 including grants of \$) (Revenue \$)
	Burkina Faso, Africa
	At the Academy, students are taught computer literacy, business education, language, as well as reading and math. Many of these students have escaped sex trafficking, and most female student have suffered genital mutilation. Education should minimize
	this practice for future generations. Of the 1100 students enrolled, 165 graduated and 80% of those earned scholarships to the
	University of Ouagadougou, Burkina Faso, Africa.
	In the villages, more than 600 women were taught to purify water for drinking, conserve water used in agriculture and horticulture.
	A decrease in child mortality has already been measurable. Improved methods of agriculture, horticulture, animal husbandry have
	increased the food production for village woman. Six bulls and 14 cows have been provided to the villages - for reproduction,
	plowing in the fieds, and sale of milk-related products. Villagers in the four chosen villages now live in peace with one another,
	forming co-ops and assisted planning has supported this effort for peace and community support.
	Near the Ghana border, a feasible study journey of 10 professionals proved the need for wells and organized farming co-ops. Funds
4-	have been acquired for two wells to be constructed in 2012.
4c	(Code:) (Expenses \$) (Revenue \$)
	Athens, Georgia  Partnering Ambassadors for Life and Service (PALS) offers classroom training for Computer Literacy, GED preparation, survival
	skills, and Literacy for disenfranchised women escaping drug and spousal abuse. Most are heads of households, single-parents
	with perceived needs for further education and skill traiing. Most beneficiaries have found gainful employment, earned their GED,
	and are no longer dependent on government subsidies. Women to the World is the source for Athens Council on Aging Training
	Program for women in the category for employment and further training. More than six women have been subsidized through such
	programs. Four women working in the WTTW office have, with resume assistance from WTTW, found full-time employment, or have
	found a valuable role to play in the PALS Program through the four-part developmental plan. The University of Georgia and Athens
	Technical Institute has chosen Women to the World as a valued partner for Internships. A contract has been entered into with
	the partner, Athens Housing Authority for a long-term project for women's inter-city development and franchisement. Three
	adjourning counties are asking for the PALS Program. Funding is pending for 2012-2013.
	Other and any and (Pagariha na Ocharla C.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ 27815 including grants of \$ ) (Revenue \$ )
	(Expenses \$ 27815 including grants of \$ ) (Revenue \$ )  Total program service expenses ▶ 117188

art	Checklist of Required Schedules		<del></del> -	<del></del>
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	2	<b>√</b>	
4	Section 501(c)(3) organizations. 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	3		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<b>√</b>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>✓</b>
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<b>✓</b>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15	1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	1	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	<	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		<b>✓</b>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		<b>√</b>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<b>✓</b>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule $M$	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	35b		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	1	
		<del></del>		<del></del>

Part	V Statements Regarding Other IRS Filings and Tax Compliance		_						
	Check if Schedule O contains a response to any question in this Part V	· .	<u> </u>						
			Yes	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable								
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable								
С	reportable gaming (gambling) with backup withholding rules for reportable payments to vendors and	1c	1						
2a									
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)								
3a	5								
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b							
4a	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)?	4a		1					
ь	If "Yes," enter the name of the foreign country: ▶	<u>4a</u>		<u> </u>					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>✓</b>					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			,					
	organization solicit any contributions that were not tax deductible?	6a		<b>-</b>					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6b							
7	gifts were not tax deductible?	90							
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods								
	and services provided to the payor?	7a		1					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			١.					
	required to file Form 8282?	7c	ļ	/					
d	If "Yes," indicate the number of Forms 8282 filed during the year	<b>-</b> -		1					
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7e 7f		1					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		•					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting								
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring								
_	organization, have excess business holdings at any time during the year?	8		✓_					
9	Sponsoring organizations maintaining donor advised funds.	-		,					
a b	Did the organization make any taxable distributions under section 4966?	9a 9b		<b>✓</b>					
10	Section 501(c)(7) organizations. Enter:	35		<b>-</b>					
а	Initiation fees and capital contributions included on Part VIII, line 12		]						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders								
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	1							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year .   12b	120							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note. See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which								
_	the organization is licensed to issue qualified health plans	-							
C	Enter the amount of reserves on hand	1445		-					
14a h	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<del> </del>	<del> </del>					

Form 99	00 (2011)			•		Page <b>5</b>
Part		ance, Management, and Disclosure For each "Yes" response to lines 2 th				
		te to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes				
Casti		if Schedule O contains a response to any question in this Part VI	· · · · ·	• •	<u>· · ·</u>	. ✓
Secu	on A. Gover	ning Body and Management			Yes	No
10	Enter the nur	shor of voting members of the governing hody at the and of the tay year	1a 5		103	110
ıa		nber of voting members of the governing body at the end of the tax year naterial differences in voting rights among members of the governing body, or	ia 3			
		ning body delegated broad authority to an executive committee or similar				
	_	xplain in Schedule O.				
b	Enter the nur	nber of voting members included in line 1a, above, who are independent	1b 5			
2		er, director, trustee, or key employee have a family relationship or a business i	elationship with			
	-	cer, director, trustee, or key employee?		2		✓
3		nization delegate control over management duties customarily performed by or				
	•	officers, directors, or trustees, or key employees to a management company or other	·	3		✓
4		zation make any significant changes to its governing documents since the prior Form 99		5		<b>√</b>
	<ul> <li>Did the organization become aware during the year of a significant diversion of the organization's assets?</li> <li>Did the organization have members or stockholders?</li> <li>Did the organization have members, stockholders, or other persons who had the power to elect or appoint</li> </ul>					
	Did the organization have members or stockholders?					
<i>1</i> a		members of the governing body?		70		/
b		rernance decisions of the organization reserved to (or subject to approval		7a		-
		, or persons other than the governing body?		7b		✓
8		nization contemporaneously document the meetings held or written actions un				
	the year by th		•			l
а	The governin	g body?		8a	<b>✓</b>	
b		tee with authority to act on behalf of the governing body?		8b	<b>✓</b>	
9		officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be seen that the section A is a section A. The section A is a section A.				
		ion's mailing address? If "Yes," provide the names and addresses in Schedule C		9	لببا	<b>✓</b>
Secti	on B. Policie	(This Section B requests information about policies not required by the	e internai Heven	ue C	oae.) Yes	No
100	Did the erger	aventum have local chanters, branches, or affiliates?		10a	168	<b>√</b>
10a b		nization have local chapters, branches, or affiliates?	f such chanters	IUa	!	V
_		branches to ensure their operations are consistent with the organization's exem		10b	'	
11a		zation provided a complete copy of this Form 990 to all members of its governing body before		11a		1
b	-	chedule O the process, if any, used by the organization to review this Form 990.	=			
12a	Did the organ	nization have a written conflict of interest policy? If "No," go to line 13		12a	<b>✓</b>	
b	Were officers, of	firectors, or trustees, and key employees required to disclose annually interests that could giv	re rise to conflicts?	12b	✓	
С	Did the orga	nization regularly and consistently monitor and enforce compliance with the I	policy? If "Yes,"			
		chedule O how this was done		12c	<b>✓</b>	ļ.,
13	_	nization have a written whistleblower policy?		13		✓_
14 15		nization have a written document retention and destruction policy? ess for determining compensation of the following persons include a review a		14	✓	
13		persons, comparability data, and contemporaneous substantiation of the deliberation				
а	•	tion's CEO, Executive Director, or top management official		15a	<u> </u>	1
b		s or key employees of the organization		15b		7
		e 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the orga	nization invest in, contribute assets to, or participate in a joint venture or simi	ilar arrangement			
		e entity during the year?		16a		1
b		the organization follow a written policy or procedure requiring the organization				1
		in joint venture arrangements under applicable federal tax law, and take steps		ļ		<u> </u>
C		s exempt status with respect to such arrangements?		16b	<u> </u>	<u></u>
17	on C. Disclo	sure s with which a copy of this Form 990 is required to be filed ► Georgia	<del></del>			
17		s with which a copy of this Form 990 is required to be filed  \( \begin{align*} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	and 990-T (Section	5014	(c)(3)<	only
		public inspection. Indicate how you made these available. Check all that apply.		. 551		y
	☐ Own web	<u> </u>				
19		Schedule O whether (and if so, how), the organization made its governing doci	uments, conflict o	f inte	rest p	oolicy
		statements available to the public during the tax year.			·	Í
20		ne, physical address, and telephone number of the person who possesses the b	ooks and records	of the	•	
	organization:	Doris Aldrich 2950 Atlanta Highway Athons CA 706-548-0000				

_			•	7
۲	ac	зе	١.	•

_			
Form	990	(201	11

Part VII	Compensation of Officers, D	Directors, Trustees,	Key Employees,	Highest Cor	mpensated I	Employees,	and
	Independent Contractors						

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization not	r any relate	d orga	anız	atıo	n c	ompe	nsa	ited any currer	t officer, director	, or trustee.	
				(0	C)						
(A)	(B)	١			ition			(D)	(E)	(F)	
Name and Title	Average					than one of the second		Reportable	Reportable	Estimated	
	hours per					or/trust		compensation	compensation from	amount of	
	week (describe	익호	2	Q	ž	₽∓	ਨ	from the	related organizations	other compensation	
	hours for	육호	stat	Officer	y e	항송	Former	organization	(W-2/1099-MISC)	from the	
	related	3 2	g		힐	yee co	=	(W-2/1099-MISC)		organization	
	organizations in Schedule	Individual trustee or director	altr		Key employee	ğ		İ		and related organizations	
	O)	$\tilde{e}$	Institutional trustee		"	Highest compensated employee				Ū	
			ď			ited					
(1) Doris Aldrich - President										· 	
110 Keystone Ct, Athens, GA 30605	70			1	1			24000			0
(2) Robert E. Lewis - Chairman	<del></del>	<u> </u>		Ť							_
1900 Sipe Rd, Conver, NC 28613	Varies	1						0			0
(3) Evona Van Gemeren											
1251 County Rd, 2500 East, El Paso, IL 61738	Varies	✓						. 0			0
(4) Pat Parks											
445 Brookwood Dr., Athens, GA 30605	Varies	✓				L		0			0
(5) Brian Seagraves									<u>'</u>		
150 Cleveland Rd, Bogart, GA 30622	Varies	<b>✓</b>						0			_0
(6) Marjorie Radford  59118 N. 644 St., Arlington VA  7)		/									
59118 N. GH St., Arlington VA	Varies	<u> </u>				<u> </u>	<u> </u>	0			0
(7) 3 22263	-										
(8)	<del> </del>	<del>                                     </del>		$\vdash$		<u> </u>	$\vdash$	<u> </u>			
	-										
(9)				_			t				_
(10)											
			<u> </u>				<u> </u>				
(11)	-										
(12)											
					_		<u> </u>	<u> </u>			
(13)	-										
(14)			┢	$\vdash$	-		┼				
(14)											

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(C)												
	(A) (B) Position (D)					(E)		(	F)				
	Name and title	Average					is both		Reportable	Reportab			nated
		hours per week	<u> </u>		_	irect	or/trus	<del></del>	compensation from	compensation related			unt of her
		(describe	Individual trustee or director	İnst	Officer	ξ	ag E	Former	the	organizatio	ons		ensation
		hours for related	lired.	₹	<u>କ</u>	Key employee	l oy nest	mer	organization (W-2/1099-MISC)	(W-2/1099-N	MISC)		n the
		organizations	ora≞	ona		Po	& g		(44-2/1099-14113C)			-	ization elated
		ın Schedule		ā		/ee	l pe					organi	zations
		O)	8	Institutional trustee		ŀ	Highest compensated employee						
-				Ľ.	<u> </u>	_	8						
(15)													
11.53					<u> </u>		<u> </u>	<u> </u>					
(16)													
			ļ		<u> </u>			ļ	ļ <u> </u>				
(17)					l								
(4.0)		<u> </u>			<u> </u>		-						
(18)													
(40)				<u> </u>				_					
(19)				<b>.</b>									
(00)				L	_								
(20)													
(04)			<u> </u>	<u> </u>							<del> </del>		
(21)													
(22)													
(22)													
(23)	-				$\vdash$					<u> </u>	<del></del>	-	-
(23)													
(24)													
(24)											-		
(25)				-				-					
(20)	·										1		
1b	Sub-total		<u> </u>		L				24000		-		0
c	Total from continuation sheets to Part			•	•		•		24000				
d	Total (add lines 1b and 1c)			•	•		•		24000		-		0
2	Total number of individuals (including but							<u> </u>	<u> </u>	oro than \$1	00 000	of.	
	reportable compensation from the organi			1056	: 1151	.eu a	above	s) w	no received in	ore man pi	00,000	OI	
_	Toportable componential from the organi	Lation										Т	Yes No
3	Did the organization list any former of	ficer, direc	tor. c	r tr	uste	ee.	kev e	eme	olovee, or high	est compe	ensated		703 110
	employee on line 1a? If "Yes," complete S											3	1
4	For any individual listed on line 1a, is the	sum of re	portat	ole (	com	nper	rsatio	n a	nd other comr	ensation fr	om the	<del></del>	
	organization and related organizations												1
	ındıvidual											4	1
5	Did any person listed on line 1a receive of												
	for services rendered to the organization?	? If "Yes," c	ompl	ete	Sch	nedu	ile J 1	or s	such person			5	· /
Section	n B. Independent Contractors												
1	Complete this table for your five highest of	compensat	ed inc	dep	end	ent	contr	acto	ors that receive	ed more tha	an \$100,	000 of	
	compensation from the organization. Rep	ort compe	nsatio	on fo	or th	ne c	alend	lar y	ear ending wit	h or within	the orga	anızatıo	n's tax
	year.												
	(A)								(B)			(C)	
	Name and business add	ress							Description of s	ervices	C	compens	ation
None													
		_											
2	Total number of independent contractor	rs (ıncludir	ng bu	it n	ot I	imıt	ed to	) th	ose listed ab	ove) who			
	received more than \$100,000 of compens	sation from	the o	rgar	niza	tion	<b>•</b>		0				

Part	VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इ इ	1a	Federated campaigns 1a					
ira Grad	b	Membership dues 1b	625				
, Š	С	Fundraising events 1c	4059				
ar /	d	Related organizations 1d					
s, (	е	Government grants (contributions) 1e					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants,					
the sta		and similar amounts not included above 1f	152269				
do	g	Noncash contributions included in lines 1a-1f \$					
<u>මූ</u>	h	Total. Add lines 1a-1f	▶	156953			
a l			Business Code				
€.	2a			_			
Program Service Revenue	b						
Zi	С						
Se	d						
ram	е						
гоg	f	All other program service revenue .					
	9	Total. Add lines 2a-2f					
	3	Investment income (including divide and other similar amounts)				!	
		Income from investment of tax-exempt bo		· · · · · · · · · · · · · · · · · · ·		-	
	4	•	' '				
	5	Royalties	(ii) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	C	Rental income or (loss)					
	d		▶		<del></del>		
	7a	Gross amount from sales of (i) Securities	(ıi) Other				
		assets other than inventory					}
	b	Less. cost or other basis					
		and sales expenses .					
	C	Gain or (loss) .		<del></del>			
	d	Net gain or (loss)	<u> ▶</u>				
9	8a	Gross income from fundraising					
/enne	""	events (not including \$					
		of contributions reported on line 1c).	•				
¥		See Part IV, line 18 a					
Other Re	ь	Less. direct expenses b					
J		Net income or (loss) from fundraising	events . ►				
		Gross income from gaming activities.					
		See Part IV, line 19 a		ı			
	b	Less: direct expenses b					
	С	Net income or (loss) from gaming active	vities ▶				
	10a	Gross sales of inventory, less					
		returns and allowances a					
	b	Less: cost of goods sold b					L
	С	Net income or (loss) from sales of inve					
	<u> </u>	Miscellaneous Revenue	Business Code			ļ	<b> </b>
	11a				<u> </u>	<b> </b>	<del> </del>
	b						<del></del>
	C	All all all and an annual an an an an an an an an an an an an an					
	d	All other revenue				-	<del></del>
	12	<b>Total.</b> Add lines 11a–11d <b>Total revenue.</b> See instructions		136540		<del> </del>	
	L'2_	iotal levellue. Occ malluctions		130340		1	L

# Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4)	organizations must con	mplete all columns.	All other organizations i	nust complete column	(A) but are not
required to complete columns	(B), (C), and (D).		_	·	

Check if Schedule O contains a response to any question in this Part IX									
Do no 8b, 9b	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and								
	organizations in the United States. See Part IV, line 21								
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	18546	18546						
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	65032	65032						
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	24000	19000	2500	2500				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)								
7 8	Other salaries and wages								
9	Other employee benefits								
10	Payroll taxes	1836	1419	206	211				
11	Fees for services (non-employees):								
а	Management	_							
þ	Legal								
C	Accounting								
d	Lobbying		-,						
е	Professional fundraising services. See Part IV, line 17		·						
f	Investment management fees								
g	Other	7398	4248	250	2900				
12	Advertising and promotion	9656			9656				
13	Office expenses	4657		2543	2114				
14	Information technology								
15	Royalties								
16	Occupancy								
17	Travel	400			400				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	400			400				
19	Conferences, conventions, and meetings .		-						
20	Interest	-			· · · · · · · · · · · · · · · · · · ·				
21	Payments to affiliates	-			·				
22	Depreciation, depletion, and amortization .	10501	8943	558	1000				
23	Insurance	10001	0043		1000				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)								
а									
b	••••••								
c									
d	***************************************		·						
e	All other expenses	<del></del>							
25	Total functional expenses. Add lines 1 through 24e	142026	117188	6057	18781				
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	142020	117100	6057	10/81				
	following SOP 98-2 (ASC 958-720)	L							

P	art X	Balance Sheet			
	•		(A) Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing	31813	1	58163
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
ļ		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ets	_	employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net	605	- <del>7</del> -8	605
•	8	Inventories for sale or use	605	9	603
	9 10a	Prepaid expenses and deferred charges Land, buildings, and equipment. cost or		9	
	IVa	other basis. Complete Part VI of Schedule D 10a 202940			
	ь	Less: accumulated depreciation 10b 58610	154832	10c	144330
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	187250	16	203098
	17	Accounts payable and accrued expenses	22222	17	23142
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
es	22	Payables to current and former officers, directors, trustees, key			
Ę		employees, highest compensated employees, and disqualified persons.  Complete Part II of Schedule L		22	
Liabilities		•		23	
_	23 24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties		24	
	2 <del>4</del> 25	Other liabilities (including federal income tax, payables to related third	<u> </u>		
	25	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	22222		23142
		Organizations that follow SFAS 117, check here ▶ ☐ and complete	-		
Ses		lines 27 through 29, and lines 33 and 34.		L	
ä	27	Unrestricted net assets	165028	27	179956
Bal	28	Temporarily restricted net assets		28	
힏	29	Permanently restricted net assets		29	
큔		Organizations that do not follow SFAS 117, check here ▶ □ and			
or Fund Balances		complete lines 30 through 34.		L	
ets	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets	32	Retained earnings, endowment, accumulated income, or other funds.	465000	32	170000
Ž	33	Total net assets or fund balances	165028		179956
	34	Total liabilities and net assets/fund balances	187250	34	203098

Form 99	0 (2011)		Pa	ge <b>12</b>
Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI	<u></u>	<u>.</u>	
1	Total revenue (must equal Part VIII, column (A), line 12)		15	56953
2	Total expenses (must equal Part IX, column (A), line 25)		14	12026
3	Revenue less expenses. Subtract line 2 from line 1		1	14928
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		16	55028
5	Other changes in net assets or fund balances (explain in Schedule O)			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,			
_	column (B))		17	79956
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII	· · ·		<del></del>
1	Accounting method used to prepare the Form 990: ☐ Cash		Yes	No
•	Accounting method used to prepare the Form 990: Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✓
b	Were the organization's financial statements audited by an independent accountant?	2b		<b>✓</b>
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			<u> </u>
	the Single Audit Act and OMB Circular A-133?	3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Forr	n <b>990</b>	(2011)

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Open to Public Inspection

**Employer identification number** Name of the organization 58-1875414 Women to the World, Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and 11g(i) (ii) A family member of a person described in (i) above? . . . . . . 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (iv) is the organization (v) Did you notify (i) Name of supported (ii) EIN (iii) Type of organization (vi) Is the (vii) Amount of organization in col organization (described on lines 1-9 in col (i) listed in your the organization in support col (i) of your (i) organized in the governing document? above or IRC section support? US? (see instructions)) ۷es No Yes (A) (B) (C) (D) (E)

Total

	le A (Form 990 or 990-EZ) 2011					,	Page <b>2</b>
Part	(Complete only if you checked the Part III. If the organization fails to	e box on line	e 5, 7, or 8 of	Part I or if the	e organizatio	n failed to qu	
	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						
Secti	on B. Total Support						
Calen	idar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	•	•			12	
13	First five years. If the Form 990 is for the organization, check this box and stop her on C. Computation of Public Support	е	<u></u>		•	ear as a section	
<u> 5ecu</u> 14	Public support percentage for 2011 (line 6			11 column (f)		14	
15	Public support percentage from 2010 Sch					15	%
16a	331/3% support test—2011. If the organization qual	ation did not	check the box	on line 13, and	d line 14 is 33	1/3% or more, c	heck this
b	33 <sup>1</sup> / <sub>3</sub> % support test—2010. If the organicheck this box and stop here. The organi	zation qualifie	s as a publicly	supported org	janization .		or more, ▶ □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization meet Part IV how the organization meets the "factorization"	ets the "facts-	and-circumsta	inces" test, che	eck this box a	nd <b>stop here.</b> I	Explain in

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

#### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support			., , ,			
Calen	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						_
_	received. (Do not include any "unusual grants.")	204629	215783	224470	200505	152894	998281
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose				2500	4059	6559
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
	i						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	204629	215783	224470	203005	156953	1004840
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						<del></del>
8	<b>Public support</b> (Subtract line 7c from line 6.)						1004940
Secti	on B. Total Support				l		1004840
	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	204629	215783	224470	203005	156953	1004840
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .	675					675
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b	675					675
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or					-	
	loss from the sale of capital assets						
13	(Explain in Part IV)	-					
10	and 12)	205304	215783	224470	203005	136540	1005515
14	First five years. If the Form 990 is for the						
	organization, check this box and stop he	-					
Secti	on C. Computation of Public Suppor	rt Percentag	е			•	
15	Public support percentage for 2011 (line	B, column (f) dı	vided by line 1	3, column (f))		15	100 %
16	Public support percentage from 2010 Sci				<u> </u>	16	100 %
Secti	on D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2011 (		• • •			17	0 %
18	Investment income percentage from 2010					18	0 %
19a	331/3% support tests—2011. If the organ						
	17 is not more than 331/3%, check this box		-				
b	331/3% support tests – 2010. If the organization 18 is not more than 331/3% check this						
20	line 18 is not more than 33½%, check this <b>Private foundation.</b> If the organization di	-	_				
20	une organization in une organization di	G HOL CHECK A	20 VOI 11116 14,	, , , , , , , , , , , , , , , , , , , ,	HOOK HIIS DOX	and Joe monde	5,15

٧	orm 990 or 990-EZ) 2011  Supplemental Information. Complete this part to provide the explanations required by Part II, line 10;
<b>V</b>	Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
<b>-</b> -	
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	·

#### SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Wome	to the World, Inc.			58-1875414
Part	Organizations Maintaining Dono organization answered "Yes" to Fo	or Advised Funds or Other Similar Fu orm 990, Part IV, line 6.	nds or A	Accounts. Complete if the
		(a) Donor advised funds	(t	) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year) .			
3	Aggregate grants from (during year)			<del></del>
4	Aggregate value at end of year		<del></del>	
5	Did the organization inform all donors and	donor advisors in writing that the assets	held in d	onor advised
_	funds are the organization's property, subject	<del>-</del>		
6	Did the organization inform all grantees, do only for charitable purposes and not for the	nors, and donor advisors in writing that gra e benefit of the donor or donor advisor, or	ant funds for any o	can be used other purpose
Part	Conservation Easements. Comp	elete if the organization answered "Yes"	" to Forn	n 990, Part IV, line 7.
2	Purpose(s) of conservation easements held!  Preservation of land for public use (e.g.,  Protection of natural habitat  Preservation of open space  Complete lines 2a through 2d if the organizate easement on the last day of the tax year.	recreation or education)	of a certif	ied historic structure
				Held at the End of the Tax Year
а	Total number of conservation easements		_	2a
b	Total number of conservation easements  Total acreage restricted by conservation easements		<u> </u>	2b
	Number of conservation easements on a cer		<u> </u>	2c
	Number of conservation easements included the conservation of the	• • • • • • • • • • • • • • • • • • • •	-	20
u	historic structure listed in the National Regis	, ,		0.4
•	<del>_</del>			2d
3	Number of conservation easements modified	a, transferrea, releasea, extinguisnea, or te	rminated	by the organization during the
	tax year ►			
4	Number of states where property subject to			· handlen a of
5	Does the organization have a written pol			
_	violations, and enforcement of the conserva			
6	Staff and volunteer hours devoted to monito	ring, inspecting, and enforcing conservatio	n easeme	ents during the year
_				
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation eas	sements o	during the year
	<b>&gt;</b> \$			
8	Does each conservation easement reported		of section	on 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?			· · · · 🗌 Yes 🗌 No
9	In Part XIV, describe how the organization re balance sheet, and include, if applicable, the organization's accounting for conservation e	text of the footnote to the organization's f		
Part	II Organizations Maintaining Colle	ections of Art, Historical Treasures, o	r Other	Similar Assets.
	<del>-</del>	vered "Yes" to Form 990, Part IV, line 8		
1a	If the organization elected, as permitted und			e statement and balance shee
	works of art, historical treasures, or other			
	public service, provide, in Part XIV, the text			
b	If the organization elected, as permitted unworks of art, historical treasures, or other public service, provide the following amount	nder SFAS 116 (ASC 958), to report in its similar assets held for public exhibition, e	s revenue	statement and balance shee
	(i) Revenues included in Form 990, Part VIII	. line 1		. > \$
	(ii) Assets included in Form 990, Part X	,		. <b>&gt;</b> \$
2	If the organization received or held works			
	following amounts required to be reported u			Julian Julia Provido III
	Revenues included in Form 990, Part VIII, lin	·		<b>▶</b> \$
	Assets included in Form 990, Part X			
b	noocio inciducu ili FUIIII 990, Parl \Lambda 🔒 🗼			. <b>–</b> D

Pa	ае	2

Part	Organizations Maintaining							
3	Using the organization's acquisition, collection items (check all that apply):	· ·	other reco	rds, checl	k any of the	e follov	ving that are a s	ignificant use of its
а	☐ Public exhibition				or exchang			
b	☐ Scholarly research		е	☐ Other				
С	Preservation for future generations							
4	Provide a description of the organiza	tion's collections	and expl	ain how th	ney further	the org	ganization's exem	npt purpose in Part
_	XIV.							
5	During the year, did the organization assets to be sold to raise funds rather	Solicit or receive	e donation	ns of art, i	nistorical tr	easure	s, or other simila	ar Notes III Notes
Part								
rait	line 9, or reported an amour				anization	aiiswe	red tes lord	onn 990, Part IV,
1a	Is the organization an agent, trustee				r contribut	ions oi	other assets no	<u></u>
- ιω	included on Form 990, Part X?							Yes 🗌 No
b	If "Yes," explain the arrangement in P							_ 1c3 _ 1t0
_	ii 100, Oxplain the arrangement ii 1	are service and comp		Jilo Willig to	40.0.		Ai	mount
С	Beginning balance					10	:	
d	Additions during the year					10	1	
e	Distributions during the year					16	•	
f	Ending balance					11	:	
2a	Did the organization include an amou	nt on Form 990,	Part X, line	€ 21?				☐ Yes ☐ No
	If "Yes," explain the arrangement in P							
Par	V Endowment Funds. Compl							
		(a) Current year	(b) Pri	or year	(c) Two year	s back	(d) Three years back	(e) Four years back
1a	Beginning of year balance							ļ
b	Contributions							
С	Net investment earnings, gains, and losses							
		<del></del>					<del></del>	
d e	Grants or scholarships Other expenditures for facilities and							
C	programs							
f	Administrative expenses	-	<del></del>					
g	End of year balance							
2	Provide the estimated percentage of the	the current vear	end baland	ce (line 1a	. column (a	)) held	as:	i
а	Board designated or quasi-endowme				,	,,		
b	Permanent endowment ▶	%						
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2							
3a	Are there endowment funds not in th	e possession of	the organi	ization tha	at are held	and ad	lministered for th	
	organization by:							Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations						· · · · · ·	3a(ii)
ь 4	If "Yes" to 3a(II), are the related organ Describe In Part XIV the intended use							_3b
Part								
Tare	Description of property	(a) Cost or		1	r other basis	(c)	Accumulated	(d) Book value
		(invest			ther)		epreciation	
1a	Land	.		ļ				
b	Buildings			<del>                                     </del>				
C	Leasehold improvements	.		<del>  .</del>	117025		E2025	62000
d e	Equipment	•			85915		53035 5575	63990 80340
	Add lines 1a through 1e. (Column (d) r	nust equal Form	990 Part	X. column		)(c) )	55/5	144330
· viai.	ridd mies ra unodgir ro. (Oolanin (d) I	nasi squai Foilli	ooo, rait.	, , <u>, , , , , , , , , , , , , , , , , </u>	12,,	17//	· · · · •	

#### **SCHEDULE F** (Form 990)

### **Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" to Form 990. Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 2011

Open to Public Inspection

**Employer identification number** 

Department of the Treasury Internal Revenue Service Name of the organization

58-1875414 Women to the World, Inc. General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the ✓ Yes □ No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) 3 (f) Total expenditures for (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a program service, describe specific type of service(s) in region offices in the region employees, agents, and region (by type) (e g , fundraising, program services, and investments investments, grants to recipients in region independent contractors ın region located in the region) hygiene, food, clothing 19,382 (1) Kenya 1 2 Orphan program (2) Kenya 0 Micro Loans Entrepreneurial trainin 14,755 (3) Burkina Faso Education-village girls Sponsorship to school 15,267 1 1 Agriculture/horticultur livestock,food growth 11,623 (4) Burkina Faso 1 Women's Technical School Education 21,919 (5) Afghanistan 1 1 (6)(7) (8) (9) (10)(11)(12)(13)(14)(15)(16)(17)Sub-total . . . . . . Total from continuation sheets to Part I . . . .

Totals (add lines 3a and 3b)

Schedule F (F	Schedule F (Form 990) 2011
Part II	art II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,
	Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000
	Part II can be dunlicated if additional space is needed

-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(2)									
(9)									
2									
(8)									
(6)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(9L)									

N

Enter total number of other organizations or entities 3

Schedule F (Form 990) 2011

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2011

Part III Grants al

Part III can be duplic	Part III can be duplicated if additional space is needed.	e is needed.					•
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Orphan Care	Kenya	155	10,800	10,800 Western Union			
(2) Micro-Business	Kenya	360	8,582	8,582 Western Union			
(3) Educational Institution	Burkina Faso	1100	10,467	10,467 Western Union			
(4) Education and Business	Afghanistan	125	12,445	12,445 Western Union			
(5) Animal Husbandry, Industry	Burkina Faso	600	4,800	4,800 Western Union			
(6) Women's Micro-Business	Turkey	78	3.347	3.347 Cash/Hand			
(7)							
(8)		-					
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
						Sch	Schedule F (Form 990) 2011

Schedule F	(Form 99	90) 2011
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Page	4

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	√ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	<b></b> ✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	☐ Yes	<b>✓</b> No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	☐ Yes	<b></b> ✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	☐ Yes	<b></b> ✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	<b></b> ✓ No

# SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service 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.

Open to Public Inspection

Employer identification number Name of the organization 58-1875414 Women to the World.Inc. Form 990, Part III, 4d. Afghanistan Project: Due to the security issues, Women to the World has chosen to continue serving the Hazara women through community health training, and Literacy. The Women to the World Compound has been sustained, even in light of severe threats and enemy intervention for women. Since 2002, Women to the World has successfully built trust and maintained a long-term relationship with communities and partners within the Kabul communities. Sewing machines have been provided for women within this community, as well as the continuation of computer skill training for both men and women. Women to the World has been instrumental in distribution of aid by U.S. Military, having stategic relationships with community leaders throughout the city. Literacy for widows and orphans is the focus. (See www.womentotheworld.org) Local partners continue to solidify a continuance of services through WTW for at-risk women and female children. Beneficiaries - 125 for 2011. Turkey Women's Project: Feasibility and Micro-Business Training, Mersin, Turkey - Kurdish Women's Skill Training Feasibility Program: Since 1985, Women to the World has been developing relationships for developmental training for Kurdish women living near Syria. Training Materials, Schedule Implementation, Teaching Skill Training, and Dr. Paul DeLargy's "Entrepreneurial Business Leadership" Training was proposed and accepted by the Turkish Government. Training is to begin in 2013. Security stresses may prolong the beginning of this program, due to difficulties in reaching the women most in need of the training. Mersin is the area of launch, and all trainers are prepared and standing in place for the implementation. Part VI, Line 11b The Board of Directors reviews a copy of the Form 990 at their annual Board meeting. Part VI, Line 12c The President and Chairman of the Board of Directors are familiar with each member of the Board, their activities and interests. Any conflict of interest is addressed immediately with the Board member. Part VI, Line 19 The Organization makes its governing documents, conflict of interest policy, and financial statements available to the general public

at the office, during normal office hours, upon request.