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Department of the Treasury Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except 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 recepts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

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

OMB No 1545-1150

2011

Open to Public Inspection

A	For the	2011 calendar year, or tax year beginning July , 2011, and ending July	na	3A ,20/2			
В	Check if a	applicable. C Name of organization D Em	mployer identification number				
	Address	change World Afrain Countral Hillan Head	5740942426				
님	Name ch		lephone r				
님	Initial reti	# RO. Box 22523	843-689-2874				
	Amended	City or town, state or country, and ZIP + 4	oup Exe	emption			
	Application	7 2 2 2 2 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2	umber				
G	Accoun	iting Method ☐ Cash ☐ Accrual Other (specify) ☐ H Check	· 🕨 🔼	if the organization is not			
	Websi			tach Schedule B			
1.	Tax-exe			0-EZ, or 990-PF).			
	Check 1	— Same and a second of the sec	lits gros	s receipts are normally			
		re than \$50,000 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be re	equired	(see instructions). But if			
		anization chooses to file a return, be sure to file a complete return.					
		s 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ.	", - .				
	art I		9	for Dord IV			
	arti	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instruction Check if the organization used Schedule O to respond to any question in this Part I.	uctions	s for Part I.)			
	1	Contributions, gifts, grants, and similar amounts received	11	12890			
8	2	Program service revenue including government fees and contracts	2				
r E	3	Membership dues and assessments	3	56328			
⊱ =3	4	Investment income	4				
Ü	5a	Gross amount from sale of assets other than inventory 5a ©	+-	<u> </u>			
	Ь	Less: cost or other basis and sales expenses	-				
د ت	C	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	٥			
<u> </u>	6	Gaming and fundraising events					
RECARRANGO	a	Gross income from gaming (attach Schedule G if greater than					
23	1	\$15,000)					
ૹૢૻ	Ь	Gross income from fundraising events (not including \$ of contributions	1				
Tr.		from fundraising events reported on line 1) (attach Schedule G if the					
		sum of sudfingross income and contributions exceeds \$15,000) 6b 0	_]				
	C	Less: direct expenses from gaming and fundraising events 6c O Net importe or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract	_				
	d		1 1				
		line 6q)	6d	<i>O</i>			
	7a	Gross sales of the Gross returns and allowances	_				
	b	Less cost of goods sold	-1 - 1	<i>a G</i> :			
	C	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	-301			
	8	Other revenue (describe in Schedule O)	8				
_	10	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	71546			
	11	Benefits paid to or for members	10	<u>ළ</u>			
s	12	Salaries, other compensation, and employee benefits	12				
nses	13	Professional fees and other payments to independent contractors	13	23051			
An a	14	Occupancy, rent, utilities, and maintenance	14	12524			
Expe	15	Printing, publications, postage, and shipping	15	1242			
	16	Other expenses (describe in Schedule O)	16	43421			
	17	Total expenses. Add lines 10 through 16	17	80238			
<u> </u>	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	~ 2697			
3ets	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with		V 163			
Ass		end-of-year figure reported on pnor year's return)	19	75780			
Net Assets	20	Other changes in net assets or fund balances (explain in Schedule O)	20	0			
Z	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	67088			

Form 990-EZ (2011)

Form		Dala::	- Ch	lane He		no for Dart II \		75	780	
Υа						ns for Part II.)	any question/m this		/60 A	
		Check	the organ	uzauon u	ised Scried	ule O to respond to	any question in this	(A) Beginning of year	<u></u>	(B) End of year
22	Cash	savings	and inves	etments		+	· /		22	(D) End of your
23		and buil	-			_			203	
24			describe in	Schedul	le O)	5ee		361	24	
25		assets	• •			Attacha			25	<u>-</u>
26	Total	liabilitie	s (describe	e in Sche	dule O)	Attachn	rent		26	
27			r fund bala			_ <u>_</u> / agi cc w			27	
Par							the instructions for l		İ	Expenses
							any question in this			quired for section
		_	•		pt purpose?		ty Educati			(c)(3) and 501(c)(4) anizations and section
as n	neasured	by exp	enses. In	a clear a	and concise		of its three largest p		494	7(a)(1) trusts, optional others)
28										
	(Grants	\$	n)	If this amou	ant includes foreign o	rants, check here .	▶ 🗇	28a	,
29	•									
	(Grants	\$	0)	If this amou	unt includes foreign g	rants, check here .	▶ 🗆	29a	
30								· · · · · · · · · · · · · · · · · · ·		
	(Grants	¢	n	,	***	int includes foreign	rants, check here .	▶ □	30a	
	10.0.10	Ψ			If this amou	int includes loreign g	ranta, oncor noic		1000	* }
31	Other pr	rogram	services (de	escribe in	Schedule C	D)				
	Other pr (Grants	rogram :	0	escribe in)	Schedule (If this amou	D)	rants, check here		31a	
32	Other pr (Grants Total pr	rogram : \$ rogram	Service ex	escribe in) penses (Schedule C If this amou add lines 28	D) Int includes foreign g Ba through 31a)	rants, check here		31a	
32	Other programmer (Grants Total programmer)	rogram s \$ rogram list of Ot	Service ex fficers, Dire	escribe in) penses (ctors, Tru	Schedule O If this amou add lines 28 ustees, and i	D)	rants, check here	npensated (see the III	31a 32 nstru	octions for Part IV.)
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art	other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V.) Check if the organization used Schedule O to respond to any question in this			Г					
	Instructions for Part V.) Check if the organization used Schedule O to respond to any question in the	Sran	Yes	No					
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		レ					
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)								
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?								
b c	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,	35b							
_	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets	35c		1					
36	during the year? If "Yes," complete applicable parts of Schedule N	36		من					
37a b 38a	Enter amount of political expenditures, direct or indirect, as described in the instructions. [37a] C Did the organization file Form 1120-POL for this year?	37b		ン					
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		1					
39	If "Yes," complete Schedule L, Part II and enter the total amount involved	1		i					
a b	Initiation fees and capital contributions included on line 9	-							
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 ▶, section 4912 ▶, section 4955 ▶								
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		· · ·					
С	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								
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		V					
41	List the states with which a copy of this return is filed. ▶								
42a	The organization's books are in care of ► Located at ► ZIP + 4 ►								
ь	Located at At any time during the calendar year, did the organization have an interest in or a signature or other authority over	1	Yes	No					
	a financial account in a foreign country (such as a bank account, secunties account, or other financial account)?	42b		V					
	If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.								
С	At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country.	42c		V					
43	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43			> 🗆					
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Yes	No					
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		تنسا					
С	Did the organization receive any payments for indoor tanning services during the year?	44c		V					
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		V					
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		~ 					
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45h		V					

Form 99	(*#ZZ (2)	D11)						P	age 4	
*,						-		Yes	No	
46		ne organization engage, directly or i								
		andidates for public office? If "Yes,"						l	<u></u>	
Part '		Section 501(c)(3) organization:								
		501(c)(3) organizations and sect			trusts mu	st answer qu	estions 47	7–49k)	
		and 52, and complete the tables							_	
		Check if the organization used Sc	hedule O to respond	I to any question i	n this Part	<u>VI</u>	 ,			
								Yes	No	
47		he organization engage in lobbying		section 501(h) elec	ction in effe	ect during the			. 1	
	•	If "Yes," complete Schedule C, Par					47		\mathcal{L}'	
48		organization a school as described i					. 48			
		ne organization make any transfers t								
	Tr "Ye	es," was the related organization a so plete this table for the organization's	ection 527 organization	on?			. [49b]	25.20	d kay	
50		oyees) who each received more that							u ney	
	Citipi	byces) who each received more than	T	T		ealth benefits,				
	(a) N	ame and address of each employee	(b) Title and average hours per week	(c) Reportable compensation	contribut	tions to employee				
		paid more than \$100,000 None	devoted to position	(Forms W-2/1099-MIS		contributions to employee benefit plans, and deferred compensation (e) Estimated amount o other compensation				
		Nerie								
									~	
	~			· · · · ·					· ·-	
			, , , , , , , , , , , , , , , , , , ,							
					l					
f	Total	number of other employees paid ov	er \$100,000	. ▶						
51		olete this table for the organization			ent contrac	tors who each	received	more	than	
	\$100,	000 of compensation from the orga	inization. If there is no	one, enter "None."						
(a) I	Name a	nd address of each independent contractor pa	iid more than \$100.000	(b) Type of s	service	(c)	Compensation	วก		
		1.								
		None	······································							
						ł				
						l				
		·······		 						
						ĺ				
				 						
d	Total	number of other independent contra	etore each receiving	Over \$100,000		L				
		nomber of other independent contra ne organization complete Schedule /	U	·	no and 40	47/2)/1)				
52		kempt chantable trusts must attach			nis and 454	47(a)(1)	► ☐ Yes		do	
		of penury, I declare that I have examined this			amonto and t	a the best of mucks		_=_		
		or perjury, i declare that i have examined this i d complete. Declaration of preparer (other that					rowledge arro	Dellei,	H IS	
		1. oh 4.	Costu		i					
Sign		Signature of officer	- Colory			Date				
Here		I Japane 1	earth or	Carche Contract	د	91	24/2	101	12	
		Type or print name and title	mi f	-, 401-4					-	
<u> </u>	—	Print/Type preparer's name	Preparer's signature		Date	Ta	PTIN			
Paid		The brehmer a timine				Check L	if			
Prepa	. 1	Firm's name	<u> </u>			Firm's EIN ▶	<u></u>			
Use C	nly	Firm's name ► Firm's address ►				Phone no				
May th	e IRS	discuss this return with the prepare	shown above? See i	nstructions		TROTTE HU	Yes		10	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

WORLD AFFAIRS COUNCIL OF HILTON HEAD Department of the Treasury Internal Revenue Service ► Attach

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

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

Open to Public Inspection

Name	of the organization	Affect chirs	Council et	6 18:17	En: H	EAC			dentification 7 - O	n number 9424	76
Pa			rity Status (All orga				e this pa				<u>, , ,</u>
The 1	-	-	ation because it is: (Fo thes, or association of		-		-		i).		
2			170(b)(1)(A)(ii). (Atta		-						
3 4	A medical res	•	spital service organiza on operated in conjunt te.						0(b)(1)(A)	(iii). Enter the	9
5	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.)										
6 7 ~	7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public										
8			ın section 170(b)(1)(A								
9	receipts from support from	activities relate gross investme	receives: (1) more the distribution of the dis	tions-su lated bu	ibject to o siness ta	certain e xable in	xceptions come (le	s, and (2) ss section) no more	e than 331/39	6 of its
10 11	An organization	on organized ar	d operated exclusively and operated exclusive blicly supported organi describes the type of	ely for tl nizations	ne benefi describe	t of, to d in sect	perform tion 509(a	the funct a)(1) or s	tions of, ection 50	9(a)(2). See :	
	a 🗌 Type I	_			III-Funct				_	Type III–Ot	her
е		indation manage	that the organization ers and other than on								
f		ation received a	a wntten determination	on from	the IRS	that it is	а Туре	I, Type	ll, or Typ	e III suppor	ting
g	Since August following pers		he organization acce	pted any	gift or co	ontributio	on from a	iny of the	•		_
			ndirectly controls, eitody of the supported							nd Ye:	s No
			on described in (i) abo							11g(ii)	
			a person described in							11g(iii)	_l
<u>h</u>			on about the support	T	<u></u>			,			
(1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) Amount of support	
				Yes	No	Yes	No	Yes	No	<u></u>	
(A)											
(B)											
(C)											
(D)											
(E)											
]	i	ı	I	1	1	1 1		

Pari									
	(Complete only if you checked the						alify under		
	Part III. If the organization fails to	qualify unde	er the tests lis	ted below, p	lease comple	te Part III.)			
	ion A. Public Support				····	r			
	ndar year (or fiscal year beginning in)	(a) 2007	(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.								
	on B. Total Support								
	dar year (or fiscal year beginning in) 🕨	(a) 2007	(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 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.	(see instruction	ons)			12			
13	First five years. If the Form 990 is for th								
	organization, check this box and stop her			<u> </u>	<u> </u>	<u> </u>	· · > 🗖		
	on C. Computation of Public Suppor								
14 15	Public support percentage for 2011 (line 6 Public support percentage from 2010 Sch		-			14	%		
	331/a% support test—2011. If the organiz				,				
	box and stop here. The organization qual						_		
ь	331/3% support test-2010. If the organ	ization did no	t check a box	on line 13 or		15 is 331/3%	or more		
17a	check this box and stop here. The organization qualifies as a publicly supported organization								
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization Explain in Part IV how the organization me supported organization	on meets the ets the	facts-and-cir: and-circumst-	cumstances"	test, check th	is box and sto	p here		
18	Private foundation. If the organization did instructions	l not check a t	oox on line 13,				see		
			· · · · · · · · · · · · · · · · · · ·		<u> </u>	<u> </u>			

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.)

Sect	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")		27135	57130	62143	64418	
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			2342	1872	2631	
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf	1				Í I	
5	The value of services or facilities						
	furnished by a governmental unit to the		j l				
	organization without charge						
6	Total. Add lines 1 through 5		201135	54492	6,61065	71449	
7a	· · · · · · · · · · · · · · · · · · ·						
	received from disqualified persons .		<u> </u>				
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						
С							
8	Public support (Subtract line 7c from						
	line 6.)						
	ion B. Total Support		·				
	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6		27155	99472	64069	-71449	
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,		70	2.6		ابررا	
	royalties and income from similar sources		73	2.65	51	41	
þ	Unrelated business taxable income (less		1				
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b		83	26	51	47	
11	Net income from unrelated business			1			
	activities not included in line 10b, whether						
	or not the business is regularly carned on						
12	Other income Do not include gain or		430	6	O	©	
	loss from the sale of capital assets		11 50	i.	المرام المرام		
40	(Explain in Part IV.)			ASTR .	18,000	100	
13	Total support. (Add lines 9, 10c, 11, and 12.)			ادر من سا		و. پرسید س	
4.4			273270	59518	1640 86	795%	
14	First five years. If the Form 990 is for the organization, check this box and stop her	e organization	's first, second	i, third, fourth,	or fifth tax ye	ar as a section	
Saati	rangang terminakan kacamatan kacama		·	::	· · · · ·	· · · · ·	· · • 📗
	on C. Computation of Public Suppor				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	·
15	Public support percentage for 2011 (line 8					15	<u>%</u>
16	Public support percentage from 2010 Sch				· · · · · ·	16	%
	on D. Computation of Investment Inc			1	(0)	Last	
17	Investment income percentage for 2011 (I			tine 13, colum	ın (f))	17	<u>%</u>
18	Investment income percentage from 2010					18	%
19a	331/3% support tests—2011. If the organi						
	17 is not more than 331/3%, check this box 8						
b	331/3% support tests—2010. If the organization 18 is not more than 331.5% shock this b	ation did not ch	neck a box on li	ne 14 or line 19	a, and line 16	is more than 33	5'/3%, and
	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization did	not check a t	oox on line 14,	19a, or 19b, ch	neck this box a	and see instruc	tions 🕨 📋



Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

ATTACHMENT TO: Form 990EZ 2011 - WORLD AFFAIRS COUNCIL OF HILTON HEAD

FORM 990EZ FOR FISCAL YEAR 2011 (July 1, 2011 - June 30, 2012)

Part I - Line 8 Other Income: \$2412 from Guest Fees

Line 16 Other Expenses: Total \$43326

Admin: Bank fees: \$64, Member Support: \$1994, National Association: \$4257, Storage: \$663

Communications, equipment, software, web site: \$10227

Community Outreach Programs: \$5832

Speaker Expenses: \$20289

Part II – As we are on a cash basis, have no capital, no liabilities and no assets other than cash, we do not prepare a balance sheet. Although our fiscal year is from July 1 to June 30, we solicit dues for the following season starting in late April and many of our members pay in May or June. Therefore our cash position is quite high at the end of our fiscal year.

Part III – Affiliated with the World Affairs Council of America, the purpose of the 800 member WACHH is to inform and educate its members and the wider community about foreign policy issues.

To accomplish these objectives, WACHH has two programs, 14 Speakers throughout the year and an Outreach program open to the community in general and to the area schools.

The Speakers Program meets twice a month from October until May and offers WACHH members and their guests an extensive program on foreign affairs, economic and national security issues through presentations by foreign affairs practitioners, academicians, government, business and military leaders. In this fiscal year we had 14 such presentations. Attendance at these presentations averaged approximately 400 attendees. The direct cost for these programs was \$20,289

Outreach has two elements. The first is a High School effort in which volunteers from WAC conduct presentations and lead foreign affairs discussion groups at local high schools. Additionally, we conduct a national program called Academic World Quest which involves all local public high schools. This year 50 students and faculty members were involved. The second is a series of programs open to members and non-members. The summer sessions are based on the Great Decisions book purchased through the National Association. The Fall Forum is different each year depending on current world events. These programs are funded by our member contributions.

Part III lines 28 through 32. We have not received any grants this year.