

2024

Accommodations Tax Funds Request Application

Organization Name: World Affairs Council of Hilton Head

Project/Event Name: 2023 WACHH Marketing Grant

Executive Summary

An ATAX Effectiveness Measurement form has been attached to this application.

2024 Accommodations Tax Funds Request Application

Date Received: 09/01/2023

Time Received: 11:07 AM

By: Online Submittal

Applications will not be accepted if submitted after 4 pm on September 1, 2023

A. SUMMARY OF GRANT REQUEST:

ORGANIZATION NAME: World Affairs Council of Hilton Head

Project/Event Name: 2023 WACHH Marketing Grant

Contact Name: Leah Long

Title: Executive Director

Address: PO Box 22523, Hilton Head, SC 29925

Email Address: execdirector@wachh.org

Contact Phone: 843-384-6758

Event Date: October 6, 2023-May 3, 2024

Event Location: First Presbyterian Church

Total Budget: \$31,000.00

Grant Requested: \$5,000.00

Provide a brief summary on the intended use of the grant and how the money would be used. (100 words or less)

Funds would be used for advertising the 2023-2024 Distinguished Speaker Programs, including our three Global Speakers programs. We will engage potential visitors and regional residents using a variety of advertising vehicles (social media, print, & digital). The Council has a limited advertising budget for 14 speaker events and cannot promote all our events consistently. Additional funding would allow us to expand our print, digital, and media marketing throughout our calendar year. We will rely more heavily on digital marketing and partnerships with other cultural organizations on HHI based on the results from last year.

How does the organization/event either drive tourism to Hilton Head Island or enhance the visitor experience on Hilton Head Island? How is this impact being measured? (100 words or less)

The Council enhances the visitor experience for many part-time and full-time residents. Affordable lifelong learning programs with world-renowned speakers are of great interest to many island visitors and residents. Many of our guests return to the programs annually. We also drive tourism by hosting speakers and their spouses in Hilton Head from Thursday to Sunday, fourteen times per season. These speakers stay in local hotels, dine at local restaurants, play golf, and take part in many other entertainment and cultural experiences

while they are here.

A. Total Number of Physical Tourists Served: 70

A Tourist is considered a non-resident, traveling more than 50 miles to the Town of Hilton Head Island.

B. Total Number of Physical Visitors Served: 387

A Visitor is considered a non-resident, who travels 50 miles or less to visit the Town of Hilton Head Island.

C. Total Number of Physical Residents Served: 1113

A Resident is considered any person who claims their property address within the limits of the Town of Hilton Head Island as their primary residence.

D. Total Number of Physical Patrons Served (A+B+C=D): 1570

How was the Number of Visitors/Tourists Documented? (250 words or less)

This is the total number of members + the total number of guests at our Distinguished Speaker Series broken down by zip code.

B. DESCRIPTION OF OPERATIONS:

1. For state reporting purposes, give a brief description of the organization. (250 words or less)

WACHH is a 501(c)(3) non-profit, non-partisan organization that offers educational programs on international affairs and other pertinent topics. Our speaker seminars, discussion groups, and student outreach programs give our members and the various public opportunities to learn about global issues.

WACHH is a membership-based organization, with dues being our primary funding source for our programming year, but our speaker programs are open to the public, and guests are welcome. Membership dues cover about 65% of our expenses, and we rely on guest fees, grants, and donations to cover the shortfall.

Our primary program, the Distinguished Speaker Series, hosts three International and eleven national speakers from October through May. Speakers bring their expertise on various topics, including foreign policy, diplomacy, technology, military, education, and other global issues. The in-person experience is valued, with the Q & A session the most interesting part of the program (example: <https://vimeo.com/606765919>). Our other programs are designed to involve the community in discussions about global topics and events.

2. Describe in detail how the requested grant funding would be used? (250 words or less)

The Council's advertising plan utilizes local print publications, social media, and print material. The grant will allow us to target audiences outside HHI.

Funds will be used to boost Facebook posts for events to increase guest attendance. Guest attendance is our best method for recruiting new members and guest fees are a major source of revenue for the Council. For every \$20 spent, a boosted post will reach an additional 160 people. We plan to spend at least \$100 per speaker (\$1400) to boost our Facebook posts related to our speaking events. We will also use \$50 each to boost our monthly Book Club posts (\$600). Social media advertising totals (\$2000).

We will advertise in the programs for other cultural/educational organizations to diversify our audience and expand our reach via print media. We will advertise in the Hilton Head Symphony Orchestra and Lean Ensemble programs. These advertisements are \$1000 each plus design fees of \$75 and \$100, respectively, totaling \$2,175. We will also advertise in the Island Packet. We will run an advertisement for our upcoming speakers in the Fall of 2024 to kick-off the 2024-2025 season. The cost of a 1/4 page ad in the Island Packet is \$1,000. Print marketing totals (\$3,175).

Tourists come to the Island for various reasons, looking for memorable, well-rounded experiences. WACHH provides tourists the opportunity to attend affordable, high-level educational programs they will want to attend yearly. Many attendees go to restaurants on the Island for lunch or dinner after our events to discuss the program.

3. What impact would partial funding have on the activities, if full funding were not received? What would the organization change to account for partial funding? (100 words or less)

Partial Funding would impact the amount of advertising WACHH could do, and thus directly impact the number of both tourists and residents we reach through advertising. This would decrease both our impact on enhancing the visitor experience and attracting new visitors.

We were able to attract one couple from Virginia to sponsor a speaker via our Facebook posts since we began experimenting with boosting posts. They plan to come to Hilton Head for two weeks this Fall. Hopefully, with greater funds we will have more stories like this to share next year.

4. What is expected economic impact and benefit to the Island's tourism? (100 words or less)

Last year we had 4,445 physical attendees (not unique as many members attend multiple events), up from 3048 the prior year, to our Distinguished Speakers Programs. Attendees visit local restaurants before and after the presentations, shop, or visit other attractions while on the Island. Our speakers stay at local hotels, and we host receptions, dinners, and lunches in their honor at local venues. The positive experience speakers, members, and guests have generated new tourism by sharing with friends, family, and colleagues. Data tracking will be done at each event using QR code scanners.

5. In order to comply with the State's Tourism Expenditure Review Committee annual reporting requirements, **please classify your current grant request into the following authorized categories:**

1 - Destination Advertising/Promotion <i>Advertising and promotion of tourism so as to develop and increase tourist attendance through the generation of publicity.</i>	100 %
2 - Tourism-Related Events <i>Promotion of the arts and cultural events.</i>	0 %
3 - Tourism-Related Facilities <i>Construction, maintenance and operation of facilities for civic and cultural activities including construction and maintenance of access and other nearby roads and utilities for the facilities.</i>	0 %
4 - Tourism-Related Public Services <i>The criminal justice system, law enforcement, fire protection, solid waste collection and health facilities when required to serve tourists and tourist facilities. This is based on the estimated percentage of costs directly attributed to tourist. Also includes public facilities such as restrooms, dressing rooms, parks and parking lots.</i>	0 %
5 - Tourist Public Transportation <i>Tourist shuttle transportation.</i>	0 %
6 - Waterfront Erosion/Control/Repair <i>Control and repair of waterfront erosion.</i>	0 %
7 - Operation of Visitor Information Centers <i>Operating visitor information centers.</i>	0 %
Total:	100 %

6. If not covered elsewhere in the application, please describe (a) how the organization will collaborate with other organizations to enhance tourism efforts, and (b) provide a venue or service not otherwise available to visitors to the Town of Hilton Head Island. (250 words or less)

WACHH currently collaborates with other World Affairs Councils in Savannah, Charleston, Columbia, Upstate, and the World Affairs Council of America by promoting our programs. We are working with the HHI Chamber of Commerce, WHHI, and Culture HHI to promote our programs. We provide speakers for local civic and educational groups and high

schools.

We have been providing quality World affairs programs for over 40 years, and we are the only non-profit organization of this type within the region. Our longevity speaks to our program's popularity, as demonstrated by our significant attendance. The pandemic has caused a substantial decrease in our attendance and, therefore, our bottom line. An aggressive ad campaign will help us achieve our goal of reaching new audiences. We are proud of our programs and take seriously the role we play in the cultural environment on the Island for those who live or visit the Island, especially for those looking for more than the average vacation experience.

7. Additional comments. (250 words or less)

In addition to our speaker programs, WACHH has two county-wide high school student outreach programs, Model UN(MUN) and Academic WorldQuest (AWQ). While different in their approach, these programs accomplish the same goal, exposing local students to world affairs. We view this as an investment in these students, future leaders of our region and country. While we could utilize the money from these programs for marketing purposes, we believe that developing a globally informed citizenry is more important.

C. FUNDING:

1. Please describe how the organization is currently funded. (100 words or less)

We are funded primarily through membership dues, donations, and grants. Membership dues allow us to obtain funding upfront so we can fund our speaker programs for the upcoming year, but they do not cover all our expenses. We also have a Global Speaker fund set up at the Community Foundation to pay for our three international speaker programs. Money for this fund came from membership donations in 2018.

2. Please also estimate, as a percentage, the source of the organization's total annual funding.

<u> </u>	Government Sources	<u>20</u>	Private Contributions, Donations and Grants
20	Corporate Support, Sponsors	<u>60</u>	Membership, Dues, Subscriptions
<u> </u>	Ticket Sales, or Sales and Services	<u> </u>	Other

3. Has the organization requested other ATAX or any other funding from other public sources or organizations?

Yes ___ No X

If so, please list top 3 sources and amounts.

D. FINANCIAL INFORMATION:

Fiscal Year Disclosure: Start Month: **July** End Month: **June**

Financial Statement Requirements:

1. The upcoming fiscal year's operating budget for the organization.

Budget Provided: **Yes**

2. The previous two fiscal years and current year-to-date profit and loss reports for the organization.

Current fiscal year Profit Loss Report Provided: **Yes**

Previous fiscal year Profit Loss Reports Provided:

FYE End 2022- Previous FY 1

FYE End 2021- Previous FY 2

3. The previous two fiscal years and current year-to-date balance sheets.

Current fiscal year Balance Sheet Provided: **Yes**

Previous fiscal year Balance Sheets Provided:

FYE End 2022 - Previous FY 1

FYE End 2021 - Previous FY 2

4. The previous two years and current year IRS Form 990 or 990T.

Current year IRS Form 990 or 990T Provided: **Yes**

Previous IRS Form 990 or 990T Years Provided:

2020 - Previous FY 1

2019 - Previous FY 2

E. FINANCIAL GUARANTEES AND PROCEDURES:

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1. Provide a copy of the **official minutes** wherein the organization approves the submission of this application.

An official set of minutes have been attached to this application.

2. Indicate whether your organization follows Town procurement guidelines or has its own procurement guidelines which are utilized and followed in the expenditure of ATAX grant funds.
 - Follow Town procurement guidelines
 - Utilize and follow organization's own procurement guidelines
 - Our organization does not have or follow procurement guidelines

F. MEASURING EFFECTIVENESS:

If you received 2022 or 2023 HHI ATAX funds

1. List any ATAX award amounts received in 2022 and/or 2023.

2023	\$5,000.00	Marketing for the Distinguished Speaker Series
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2. How were the ATAX funds used? To what extent were the objectives achieved? The ATAX Effectiveness Measurement spreadsheet available in the application portal will show the numerics. Use the space below for verbal comments. (200 words or less)

ATAX grant funds were used for print advertising in Local Life magazine and the Hilton Head Symphony Orchestra program. However, because notifications of funding are sent in March, toward the end of our program year, I believe we experience a lag in effect. Essentially we receive funds to advertise for the following program year because we begin advertising for the next season in May. For example, we increased total physical attendance from 3048 in 2021-2022 to 4445 in 2022-2023. That shows the effect of the ATAX funding received in March 2022 that was used for the 2022-2023 program year. Similarly, the funds received in March 2023 will not take effect until October 2023 when our program year starts.

3. What impact did this have on the success of the organization/event and how did it benefit the community? (200 words or less)

Our number of attendees increased, as did the number of guests. Our total number of guests increased from 156 in 2021-2022 to 517 in 2022-2023, significantly increasing our revenue from guest fees. This impacted the community because an increased number of both residents and non-residents visited the island for our events and dined, stayed, and enjoyed entertainment on the island, thus increasing revenues for local businesses.

4. How does the organization measure the effectiveness of both the overall activity and of individual programs? (200 words or less)

- Measure the # of non resident attendees at each event
- Measure the # of overall attendees
- Measure # of clicks on digital media ads
- Measure the number of clicks on our website
- Number of guest surveys answered

G. EXECUTIVE SUMMARY

Provide an executive summary using the "ATAX Effectiveness Measurement" form provided via the link on the left, or by utilizing the text area provided below to report uses of the organization's prior ATAX grant, if applicable. If creating your own format, please refer to the "ATAX Effectiveness Measurement" form and use the criteria as a guideline in developing your executive summary below. (1300 words or less)

[An ATAX Effectiveness Measurement form has been attached to this application.](#)

Signature: Leah Long

Title/Position: Executive Director

Mailing Address: PO Box 22523, Hilton Head, SC 29925

Email Address: execdirector@wachh.org

Office Phone Number: 843-384-6758

Home Phone Number: 843-382-6758



World Affairs Council HILTON HEAD

September 1, 2023

Dear ATAX Committee,

We prepare Balance Sheets and Profit and Loss statements quarterly. Therefore, we do not have current year-to-date statements at this time.

Sincerely,

Leah Long

Executive Director

Office: 200 Main St #201M, HHI SC 29926

Mail: P.O. Box 22523H, HHI, SC 29925

(O) 843-384-6758 (C) 201-788-0812

Educating, engaging, & inspiring the community about world affairs!

www.wachh.org

Year 2020

	Ck #	AMT
Jan	2758	412.5
Feb	2769	382.5
Tracey Mrozek	2777	266.25
451-19-6447		0
15 Indian Hill Lane		0
29926	2791	135
	2794	157.5
	2796	93.75
	2799	67.5
	2803	60
		0
	2807	120
		<u>1695</u>

Maureen Korzik
31 Doubloon Drive
29928
152-52-0652

Jan	2756	4925
Feb	2768	4925
March	2776	4925
April	2784	2500
May	2786	2500
June	2788	4850
June	2790	4925
July	2793	4925
August	2795	4925
Sept	2798	4925
Oct	2802	4925
Nov	2805	4925
Dec	2810	4925
		<u>59100</u>

Year 2021

Jan	2814	105
Feb		0
March		0
April	2822	131.25
May		0
June	2828	300
July	2832	236.25
August	2836	90
Sept	2841	285
Oct	2846	412
Nov	2856	252
Dec		0
		<u>1811.5</u>

Jan	2813	5925
Feb	2817	4925
March	2821	4925
April	2824	4925
May	2867	4925
June	2831	4925
July	2834	4925
August	2839	4925
Sept	2844	4925
Oct	2852	4925
Nov	2859	4925
Dec	2869	4925
		<u>60100</u>

	beginning	3240.21					
	pay	-3240.21	51.76	12.83	2113.56	58.81	
	cash back	-314.89	270.18	23.2	60.87	83.74	
	charges	2450.25	64.22	22.6	315.02	522.86	
			147.62	1.99	4	1	
	ending bala	2135.36	340	83.74	14.84	666.41	
			157.91	58.93	15.89		
			15.89	203.29	9.48		
	666.41 pending		44.12		10		
	2623.38 new		183.7		12.71		
	-203.29 pay		120.32		1.99		
	-4.06 cash		121		29		
			183.7		36.02		
3082.44			12.71				
157.77			106		2623.38		
			40.6				
			1.99				
			529.72				
			58.81				
			2450.25				

July

balance per bank	15937.89
unpaid credit card charges	-8577.31
os check 2833	-600
os check 2835	-150
total	6610.58
balance per books	6610.58
Diff	0

January

balance per bank	
unpaid credit card charges	
checks O/S	
total	
balance per books	
Diff	

August

balance per bank	54634.34
unpaid credit card charges	-3237.06
os check 2833	-600
os check 2838	-125
2840	-90
total	50582.28
balance per books	50582.28
Diff	0

February

balance per bank	
unpaid credit card charges	
checks O/S	
total	
balance per books	
Diff	

September

balance per bank	42446.46
unpaid credit card charges	-2462.99
checks O/S 2833	-600
2843	-100
CC charge not posted	-59.7
total	39223.77
balance per books	39223.77
diff	0

March

balance per bank	
unpaid credit card charges	
checks O/S	
total	
balance per books	
Diff	

October

balance per bank	33579.97
checks O/S 2851	-49.6
2853	-2152.5
unpaid credit card charges	-57.16
unpaid credit card charges	-2839.2
cc charges not posted	-59.7
cc charges not posted	-1947.5
total	\$ 26,474.31
balance per books	26474.31
diff	0

April

balance per bank	
unpaid credit card charges	
checks O/S	
total	
balance per books	
Diff	

May

balance per bank	
unpaid credit card charges	
total	
balance per books	
Diff	

November

balance per bank	17441.12
checks O/S 2855	-1103.94
2858	-987
accrual WACA conf	-1500
accrual ext	-760
cc charges not posted	-59.7
cc charges not posted	-1947.5
unpaid credit card charges	-3240.75
total	7842.23
balance per books	7842.23
diff	0

June

balance per bank	
unpaid credit card charges	
checks O/S	
total	
balance per books	
Diff	

December

balance per bank CSB	4104
balance per bank WF	23700.84
checks O/S 2863	0
accrual FPC	-760
cc charges not posted	-4185.61
unpaid credit card charges	-59.7
Unpaid Amex	-60.62
total	22738.91
balance per books	22738.91
dif	0

January

balance per bank CSB	6661
balance per bank WF	6913.53
CSB OP due to MM	
checks O/S 2873	-1295.21
2875	(864.00)
accrual	-5175
Unpaid AMEX	-3240.21
charges not posted to AMEX	-52.76
Feb charges	620.89
total	3568.24
balance per books	3568.24
diff	\$ 0.00

AMEX Roll forward

balance	203.29
payment	-203.29
credits	-4.06
charges	3244.27
31-Jan	3240.21

equals 60.62 posted in Dec plus 142.67 posted in January

February

balance per bank CSB	7495.59
CSB OP due to MM	0
1004	-279.81
checks O/S 1006	-1591
1007	-408.75
accrual	-800
Unpaid AMEX	-2135.36
March Amex	588.53
	-1546.83

AMEX Roll forward

balance	3240.21
payment	-3240.21
credits	-314.89
charges	2450.25
28-Feb	2135.36

	total		2869.2				
	balance per books		3743.73				
	diff	\$	(874.53)				
March	balance per bank		13688.96				
	CSB OP due to MM		0				
	checks O/S	1017	-3182	AMEX Roll forward			
		1018	-5110.38				
		1019	-800	balance	2135.36		
	accrual		-547.2	payment	-1864.3		
	Unpaid AMEX	-3196.23		credits	-358.18		
	April Amex	231.6	-2964.63	charges	3283.35		
	accrued CFL		7873.64	3-31 bal	3196.23		
	total		8958.39				
	balance per books		9832.92				
	diff	\$	(874.53)				
April	balance per bank		13342.36				
	CSB OP due to MM		0				
	checks O/S			AMEX Roll forward			
				balance	3196.23		
	accrual		0	payment	-3196.23		
	Unpaid AMEX	-3709.67		credits	-59.48		
	May Amex	58.78	-3650.89	charges	3769.15		
				30-Apr	3709.67		
	total		9691.47				
	balance per books		10566				
	diff	\$	(874.53)				
May	balance per bank		9847.2				
	CSB OP due to MM						
	checks O/S	1030	-1300	AMEX Roll forward		B of A roll forward	
		1037	-1604.2				
		1040	-756.75	balance	3709.67	2556	
	accrual		-598.39	payment	-3702.9	-5112	
	Unpaid AMEX		-3387.52	credits	-478.16		
	june Amex charge		58.78	charges	3858.91	995.75	
	unpaid BA		1560.25	30-May	3387.52	-1560.25	
	total		3819.37				
	balance per books		4693.91				
	diff	\$	(874.54)				
				\$(8,024.49)	Pay Pall Issue		
June	balance per bank		10443.25				
	CSB OP due to MM						
	checks O/S	1044	0	AMEX Roll forward		B of A roll forward	
				balance	3387.52	-1560.25	
	accrual		-98.39	payment	-3209.02	0	
	Unpaid AMEX		-164.2	credits	-260.34	-490.85	
	july Amex charge		58.78	charges	246.04	466.69	
	unpaid BA		1584.41	30-Jun	164.2	-1584.41	
	total		11823.85				
	balance per books		12698.39				
	diff	\$	(874.54)				

	Total	Tax return line #1 Contrib, gifts and grants	#2 Program Service Revenue	#3 Membership Dues	#4 Investment Income
Income					
Dues	\$ 39,610.00			\$ 39,610.00	
Prepaid Dues	\$ 33,640.00			\$ 33,640.00	
Even Speaker Series	\$ 5,670.00		\$ 5,670.00		
Guest Fees	\$ 1,775.00		\$ 1,775.00		
Contributions	\$ 44,664.50	\$ 44,664.50			
prepaid outreach sponsorships					
Enhanced Speaker Series	\$ 20,558.64		\$ 20,558.64		
grants	\$ 8,894.00	\$ 8,894.00			unusual grant for Schedule A
Great Decisions	\$ 2,056.00		\$ 2,056.00		
prepaid GD					
MISC	\$ 2,252.04		\$ 570.00		\$ 1,682.04
total	\$ 159,120.18	\$ 53,558.50	\$ -	\$ 30,629.64	\$ -
				\$ 73,250.00	\$ -
					\$ 1,682.04

	LINE 11	13	14	15	Sch O 16	28	29	30
EXPENSES		ind contractor	rent	print, postage	other			
Friday speaker series	\$ (58,260.11)		-11781		\$ (46,479.11)	\$ (58,260.11)		
ESS program	\$ (3,425.16)				\$ (3,425.16)		\$ (3,425.16)	
Great Decisions	\$ (1,993.00)				\$ (1,993.00)	\$ (51,897.27)	\$ (1,993.00)	
Communications and other member service and forums	\$ (9,053.88)	\$ (750.00)			\$ (8,303.88)			
Outreach programs	\$ (5,628.44)				\$ (5,628.44)			\$ (5,628.44)
Executive Director	\$ (64,556.50)	\$ (64,556.50)						
marketing	\$ (13,497.85)				\$ (13,497.85)			
National dues and meetings	\$ (4,789.48)				\$ (4,789.48)			
insurance	\$ (3,353.98)				\$ (3,353.98)			
other administration	\$ (9,572.30)		-700	\$ (496.00)	\$ (8,376.30)			
interest ion loan	\$ -							
total	\$ (174,130.70)	\$ (750.00)	\$ (64,556.50)	\$ (12,481.00)	\$ (95,847.20)	\$ (58,260.11)	\$ (5,418.16)	\$ (5,628.44)

Revenue>Expenses	\$ (15,010.52)
Beginning cash	\$ 133,474.26
Ending cash	\$ 118,463.74

Notes Sale of books considered diminimus and not reported separately
Investment income includes cash back from credit card purchases - amounts not material to Schedule A
Other admin is mostly Paypal commissions ans supplies

DETAIL OF FRIDAY SPEAKER EXPENDITURES

DATE	SPEAKER	FEE	plane fare	car/limo	LODGING	MEALS	ETC	FPC RENTAL	FPC TECH	fpc sexton	total	Cumulative	per checkbook	Other Cost
														excludes fee and FPC
10/01/2021	Bolden	1000	490.32	1174.7	541.98	121.82	11.35	1071	400	160	4971.17			2340.17
10/22/2021	Levine	1000	1494.4	658.1	526.14	88.73		1071	400	160	5398.37	10369.54		2767.37
11/05/2021	Tierney	1000	641.81	462.13	745.92	125.43	116	1071	250	160	4572.29	14941.83		4322.29
11/19/2021	Menon	5000	-76.8	267.84	861.36	286	30	1071	400	160	7999.4	22941.23	-22941.23	7599.4
12/03/2021	Turkel	1000			1295.21	194.85		1071	250	120	3931.06	26872.29	(25,577.08)	
01/07/2022	Pandith	1000	0	0	0	0		0	0		1000	27872.29		
01/21/2022	Yacoubian	1000	322.8					0	-600	-160	562.8	28435.09	reverse accrual	

July Receipts	PayPal	other	bank depo: 13-Jul	bank depo: 28-Jul	bank deposit	Total	
member dues	3125		1125	875		5125	
guest fees						0	
Contributions							
outreach	86		125			211	
program	200					200	
Sponsorship	1000					1000	
Board						0	
Travel Commission						0	
GD books	64		32			96	
Grant						0	
interest and cash back		0.7				0.7	
total	4475	0.7	1282	875		6632.7	
AUGUST	PayPal	other	deposit 05-Aug	refund 30-Aug		Cumulative Total	
member dues	10290			875	-125	11040	16165 net of \$85 i
guest fees	200					200	200
Contributions						0	
outreach	371		100	185		656	867
program			5478.5			5478.5	5678.5
sponsorship				1500		1500	2500
Board						0	0
Travel Commission						0	0
GD books	192			32		224	320
Grant						0	0
Interest and Cash back		0.71				0.71	1.41
total	11053	0.71	5578.5	2592	-125	19099.21	25731.91
Sept	PayPal	cash back	bank depo: 17-Sep	bank depo: interest	bank deposit 30-Sep		
member dues	10750		1375			12125	28290
guest fees	220					220	420
Contributions						0	
outreach	260		125			385	1252
program	80					80	5758.5
sponsorship	2000					2000	4500
Board						0	0
Travel Commission						0	0
GD books	352		30			382	702
Grant						0	0
bank interest and cash back		246.97		1		247.97	249.38
total	13662	246.97	1530	1	0	15439.97	41171.88
OCTOBER 2021	PayPal	23-Oct	05-Oct	interest	21-Oct		
member dues	2625	125	995			3745	32035
guest fees	-60		40			-20	400
Contributions						0	0
outreach			50			50	1302
program			100		16	116	5874.5
sponsorship					2500	2500	7000
Board						0	0
ESS						0	0
GD books	160		32			192	894
Grant						0	0
bank interest and cash back				0.89		0.89	250.27
total	2725	125	1217	0.89	2516	6583.89	47755.77
November	PAYPAL	depoit 09-Nov	deposit 23-Nov	bank			
member dues	2500	250	250			3000	35035
guest fees	225	80	75			380	780
Contributions						0	0
outreach		100				100	1402
program	776	2050	100			2926	8800.5
sponsorship	500	2000				2500	9500
Board	-177.89					-177.89	-177.89 19524.61

ESS		1235		360				1595	1595	
GD books		32	32					64	958	
Grant								0	0	
bank interest and cash back								0.87	251.14	
total		5090.11	4512	785				10387.98	58143.75	

DECEMBER

	PAYPAL	depoit 06-Dec	deposit 21-Dec	bank	deposit 28-Dec	PayPal adjust				
member dues	710	250					960	35995		
guest fees	75		35				110	890		
Contributions							0	0		
outreach							0	1402		
program	290				600		890	9690.5		
sponsorship	1000				500		1500	11000		
board						177.89	177.89	0	22092.5	
ESS	1650		160				1810	3405		
GD books							0	958		
Grant							0	0		
bank interest and cash back				0.24	130.62	64.11	194.97	446.11		
CFL GSS reimbursement					12685		12685	12685		
total	3725	250	195.24	12815.62	1164.11	177.89	18327.86	76471.61		

JANUARY

	PAYPAL	depoit 14-Jan	deposit 31-Jan	bank						
member dues	1995						1995	37990		
guest fees	85						85	975		
Contributions							0	0		
outreach		2000					2000	3402		
program		109					109	9799.5		
sponsorship							0	11000		
board							0	0	24201.5	
ESS	1285						1285	4690		
GD books	554	256	192				1002	1960		
Grant							0	0		
bank interest and cash back					91.12		91.12	537.23		
CFL GSS reimbursement							0	12685		
total	3919	2365	192	91.12	0	0	6567.12	83038.73		

FEBRUARY

	PAYPAL	deposit 10-Feb		bank						
member dues	1190	85					1275	39265		
guest fees	110	20					130	1105		
Contributions							0	0		
outreach							0	3402		
program							0	9799.5		
Sponsor		1500					1500	12500		
board							0	0	25701.5	
ESS	630						630	5320		
GD books		64					64	2024		
Grant		8894					8894	8894		
bank interest and cash back			314.89	87.42			402.31	939.54		
CFL GSS reimbursement							0	12685		
Speaker book sales	50	250					300	300		
total	1980	10813	314.89	87.42			13195.31	96234.04	95934.04	

MARCH

	PAYPAL	23-Mar	09-Mar	bank	amex	accrual				
member dues	345						345	39610		
guest fees	155	60	150				365	1470		
Contributions							0	0		
outreach		2000					2000	5402		
program	225	300					525	10324.5		
Sponsor		2000					2000	14500		
board							0	0	30226.5	
ESS	280		70				350	5670		
GD books	32						32	2056		
Grant							0	8894		
bank interest and cash back			0.04	92.64	48.99		141.67	1081.21		
CFL GSS reimbursement						7873.64	7873.64	20558.64		

Speaker book sales				270					270	570	
total	1037	4360	490.04	92.64	48.99	7873.64			13902.31	110136.35	
APRIL	PAYPAL	deposit	deposits	bank	amex	deposits					
		04-Apr	18-Apr			28-Apr					
member dues									0	39610	
deferred dues	5220								5220	5220	
guest fees	180	60							240	1710	
Contributions									0	0	
outreach						45			45	5447	36821.5
program		3500	500			250			4250	14574.5	
Sponsor						1700			1700	16200	
HCF related		525	75						600	600	
Deferred	875								875	875	
ESS									0	5670	
GD books									0	2056	
Grant									0	8894	
bank interest and cash back				28.29	59.48				87.77	1168.98	
CFL GSS reimbursement									0	20558.64	
Speaker book sales									0	570	
total	6275	4085	575	28.29	59.48	1995			13017.77	123154.12	
May	PAYPAL	deposits	deposits	bank	amex	misc 2					
		13-May	31-May								
member dues									0	39610	
deferred dues	12470	6815	1160						20445	25665	
guest fees	50								50	1760	
Contributions									0	0	
outreach	10								10	5457	36231.5
program									0	14574.5	
Sponsor									0	16200	
HCF related									0	600	
Deferred	1570	1238	2155						4963	5838	
ESS									0	5670	
GD books									0	2056	
Grant									0	8894	
bank interest and cash back				29.07	75.39				104.46	1273.44	
CFL GSS reimbursement									0	20558.64	
Speaker book sales									0	570	
total	14100	8053	3315	29.07	75.39	0			25572.46	148726.58	
JUNE	PAYPAL	deposits	deposits	bank	amex	BA					
		11-Jun	30-Jun								
member dues									0	39610	
deferred memberships	6670	1305							7975	33640	
guest fees	15								15	1775	
Contributions									0	0	
outreach									0	5457	
program									0	14574.5	
Sponsor									0	16200	
HCF related									0	600	
Deferred	1195	800							1995	7833	
ESS									0	5670	
GD books									0	2056	
Grant									0	8894	
bank interest and cash back				46.38	69.13	293.09			408.6	1682.04	
CFL GSS reimbursement									0	20558.64	
Speaker book sales									0	570	
total	7880										
total	7880	2105	0	46.38	69.13	293.09			10393.6	159120.18	

as of april 24, 2021	FYE 2021	Preliminary		
	Forecast	2022		
accrual basis		Budget	20 @85	1700
Revenues			900 @125	112500
member dues	\$ -	\$ 114,200		
evening program fees	\$ 5,670.00	7500	300 @25	
Great Decisions fee	\$ -	2250	75 @30	
guest fees	\$ 1,470.00	3750	300 @12.50	
Contributions and Grants				
board and other	\$ 5,125.00	8000		
outreach	#VALUE!	6000		
CFL - global speaker	\$ 20,558.64	18450		
HCF match	0	1000		
Sponsorships	0	0		
A-Tax Grant	0	8900		
SC Cares Grant	\$ -	0		
Misc	0	0		
interest/caash back	200	200		
total	#VALUE!	\$ 170,250.00		
Expense			12000	honariaium
Member Programs			20650	T&E 1721/speak
Friday Speaker	12090	47650	15000	FPC
GSS	10090	18450		
Evening Speaker	0	3000	3 @1000	
Fall Forums	0	0		
Great decisions	1673	1800		
Summer Forum	0	0		
Outreach Program				
AWQ	0	8500		
Model UN	0	3500		
Communications				
Website and phone	9050	6000		
Marketing	3770	4000		
Marketing grant - A-Tax	0	8900		
Daily Chatter	750	1250		
Membership mtgs	0	1000		
Administrative				
Executive Director	60100	61800	\$5150 per month average	
Asisstant to ED	900	3200		
National Meeting	123	3000		
WACA support	2000	0		
National Dues	1000	1000		
Insurance	3000	3200		
USPS	820	1000		
Supplies	500	1300		
interest	1517	0		
Paypal Commissions	1559	2200		
Misc	2000	2000		
TOTAL	110,942	182,750		
Revenues over (under) expense	#VALUE!	\$ (12,500)		

	Sponsors	Birdies	Program	Outreach	Year end appeal	Outreach Grant	total	
Pre July				5109				
July	1000		200	211			1411	
August	1500	5478.5		656			7634.5	
September	2000		80	385			2465	
October	2500		116	50			2666	
November	2500			100	2926		5526	
December	1500			0	890		2390	
January	0		109	0		2000	2109	24201.5
	<u>11000</u>	5478.5	505	1402	3816	2000		
reclass		-5478.5	5478.5	2000		-2000		
			3816		-3816			
	11000	0	9799.5	3402	0	0		24201.5
available for OR				8511				

Balance Sheet as of		07/01/2021	06/30/2022 change in cash	WORLD AFFAIRS COUNCIL OF HILTON HEAD			
operating account		13984.91	\$ 11,843.86				
paypal account		36725.01	\$ 7,782.14				
savings/MM account		82764.34	\$ 98,837.74				
Total		<u>\$133,474.26</u>	<u>\$ 118,463.74</u>			\$(15,010.52)	
Restricted CFL	478/C9F4L	<u>\$174,610.00</u>	<u>\$ 132,689.00</u>	Receipts from 06/30/2021	TOTAL	receipts from 06/30/2022	Accrual Basis
Revenues							
Dues		\$ 39,610.00	\$ 53,625.00	\$ 93,235.00		\$ 93,235.00	
Deferred member dues		\$ 33,640.00		\$ 33,640.00	\$ 33,640.00	\$ -	
Even Speaker Series		\$ 5,670.00		\$ 5,670.00		\$ 5,670.00	
Guest Fees		\$ 1,775.00		\$ 1,775.00		\$ 1,775.00	
Contributions	outreach	\$ 5,457.00	\$ 5,109.00	\$ 10,566.00		\$ 10,566.00	
	programs	\$ 14,574.50		\$ 14,574.50		\$ 14,574.50	
	sponsorships	\$ 16,200.00	\$ 5,500.00	\$ 21,700.00		\$ 21,700.00	
	HCF related	\$ 600.00		\$ 600.00		\$ 600.00	
	deferred	\$ 7,833.00		\$ 7,833.00	\$ 7,833.00	\$ -	
Enhanced Global Speaker Series		\$ 20,558.64		\$ 20,558.64		\$ 20,558.64	
GD Sales		\$ 2,056.00	\$ 544.00	\$ 2,600.00		\$ 2,600.00	
Grant for marketing		\$ 8,894.00		\$ 8,894.00		\$ 8,894.00	
Speaker Book Sales		\$ 570.00		\$ 570.00		\$ 570.00	
Interest income		\$ 1,682.04		\$ 1,682.04		\$ 1,682.04	
Outreach Prior Years			<u>\$16,164.00</u>			<u>\$ 21,101.56</u>	
Revenues		<u>\$ 159,120.18</u>	<u>\$ 80,942.00</u>	<u>\$ 223,898.18</u>	<u>\$ 62,574.56</u>	<u>\$ 182,425.18</u>	
Expenses							
Friday Speaker Series		\$ (42,387.07)		\$ (42,387.07)		\$ (42,387.07)	
Global speakers		\$ (15,873.04)	\$ -	\$ (15,873.04)		\$ (15,873.04)	
ESS program		\$ (3,425.16)		\$ (3,425.16)		\$ (3,425.16)	
Great Decisions		\$ (1,993.00)		\$ (1,993.00)		\$ (1,993.00)	
Forums		\$ (533.90)		\$ (533.90)		\$ (533.90)	
Outreach AWQ and Model UN		\$ (5,628.44)		\$ (5,628.44)	0	\$ (5,628.44)	
Website and phone		\$ (7,769.98)		\$ (7,769.98)		\$ (7,769.98)	
Marketing		\$ (10,112.85)		\$ (10,112.85)		\$ (10,112.85)	
Marketing grant		\$ (3,385.00)		\$ (3,385.00)		\$ (3,385.00)	
Daily Chatter		\$ (750.00)		\$ (750.00)		\$ (750.00)	
Executive Director Compensation		\$ (60,600.00)		\$ (60,600.00)		\$ (60,600.00)	
Asst ED		\$ (3,956.50)		\$ (3,956.50)	-427.5	\$ (4,384.00)	June paid in July
National Meetings		\$ (3,789.48)		\$ (3,789.48)		\$ (3,789.48)	
membership meetings		\$ -		\$ -		\$ -	
National Dues		\$ (1,000.00)		\$ (1,000.00)		\$ (1,000.00)	
Supplies		\$ (2,510.33)		\$ (2,510.33)		\$ (2,510.33)	
Insurance		\$ (3,353.98)		\$ (3,353.98)		\$ (3,353.98)	
USPS		\$ (496.36)		\$ (496.36)		\$ (496.36)	
Sponsorship costs		\$ (482.03)		\$ (482.03)		\$ (482.03)	
Speaker Book costs		\$ (368.78)		\$ (368.78)		\$ (368.78)	
Paypal commissions		\$ (2,293.72)		\$ (2,293.72)		\$ (2,293.72)	
Other Miscellaneous Admin		\$ (3,421.08)		\$ (3,421.08)	700	\$ (2,721.08)	deposit on office
Expenses		<u>\$(174,130.70)</u>	<u>\$ -</u>	<u>\$(174,130.70)</u>	<u>\$ 272.50</u>	<u>\$(173,858.20)</u>	
Revenues over Expenses		<u>\$ (15,010.52)</u>	<u>\$ 80,942.00</u>	<u>\$ 49,767.48</u>	<u>\$ 62,302.06</u>	<u>\$ 8,566.98</u>	
Unrestricted fund balance			<u>\$ 52,532.26</u>			<u>\$ 56,161.68</u>	

	original	December thru june
based on 2021 contract	12000	
2020 was \$915/speaker for those that traveled (excluded Global) remaining 10 speakers	<u>12000</u>	<u>10000</u>
Bit of a guess; 2020 was 5300- includes cost of wwebinars for 2 Local Lfe ads	6000 3600	3000 1800
does not include travel for JL	2000	
Assumes no live meeting. Cost for virtual is unknown		
2020 dues - may increase???	900	900
fewer members - down from 1250	1000	1000
10% over PY	3300	3300
	500	500
	650	600
	1500	1200
(excludes commissions on prepaid 2022 memberships)	880	0
900 increase	60000	34475
2/3rds of 2020	1000	700
	<u>81330</u>	<u>47475</u>
loan interest Nov-June 8*115		920
	<u>93330</u>	<u>58395</u>
cash balance net of loan 30-Nov	\$ -	66940
CFL reimbursement for GSS	0	9144
less Acc Outreach	10	-12143
cash to cover estimated remaining costs	<u>10</u>	<u>63941</u>
does not include any interest on loan. Net unrestricted fund bal equivalent of 360 members	<u>93320</u>	5546

For the FYE 6/30/20

WORLD AFFAIRS COUNCIL OF HILTON HEAD ISLAND

		Basis for budget	
Revenues			
member dues	116,375	No dues increase - same basis as PY	
evening program fees	8800	PY revenues	
Great Decisions fee	1750	70 participants at \$25pp	
guest fees	<u>6000</u>	PY revenues	
	<u>132925</u>		
Contributions and Grants			
program	0	PY reveunes - may have been impacted by MTM and dues increase	
outreach	10000	Increase emphasis on AWQ contribution	
CFL - global speaker	15000	Offset by budget for Friday Speaker Expense	
Heritage Classic Ftn	2000	BFC increase over PY	
other	<u>0</u>	Potential requests for grants would be offset by unbudgeted expense	
	<u>27000</u>		
Speaker Book Sales			
Cost of Books		Friday Speaker	
margin	<u>1000</u>	2 global speakers	15000
		12 regular speakers at \$2500pp	30000
interest	<u>30</u>	FPC 8 months at \$2650	21200
		FPC Tech 14 sessions at \$150	<u>2100</u>
		total	<u>68300</u>
total	<u><u>160955</u></u>		
Expense			
Member Programs			
Friday Speaker	68,300	see above	
Evening Speaker	5600	4 events at \$1400 per for rental and refreshments	
Forums	500	Misc	
Great decisions	2260	Rental of \$1,000 and book cost of \$18 for 70 books	
Summer Forum	<u>0</u>	included in forums	
	<u>76660</u>		
Outreach Program			
AWQ	9200	Local at \$2150 and National at \$7050 see detail	
Model UN	<u>3400</u>	250 for flags; 8 participants at HHP, 118 participants at Beaufort Cty Public at \$25pp	Same as PY actual
	<u>12600</u>		
Communications			
Website and phone	3420	Verizon at \$60/month + Wild apricot at 2200+ Dakota at 300+computer repair at 200	
Marketing	5500	Advertising of 2500, brochure redo of \$1000, and \$2,000 membership renewal material	
Daily Chatter	1000	annual fee	
Other Member services	0	misc - lapel pins and American Legion poppies in PY	
equipment/rental	0		
Membership mtgs	<u>250</u>	For mtgs of volunteers and the Annual Meeting at FPC	
	<u>10170</u>		
Administrative			

Executive Director	58950	Includes 3% increase effective October 1.
Asisstant to ED	4500	\$15/hr for 300 hours (increase over PY)
National Meeting	3000	3 participants at \$1000 each for transporation and lodging (attendance fee prepaid in 2019
WACA support	3200	Includes annual attendance at WACA mtg (1200), 1918 membership at 1000 and \$1,000 contribution to WACA
National Dues	600	Actual per new rate schedule
Insurance	2850	\$2200 for liability and \$650 for D&O
USPS	1000	
Supplies	1250	Staples, primarily
Misc	1350	Principally EXCOM meetings, other unclassified, a nd Paypal fees
	<u>76700</u>	

Fund Raising	<u>0</u>
TOTAL	<u><u>176130</u></u>
Revenues over (under) expense	<u><u>-15175</u></u>

AWQ Budget	local	national
gift cards	950	
trophies	500	
shirts	500	
misc	200	
GD books	0	in-kind contribution
air and hotel		5950 \$850pp for 7 attendees
stipend		500 \$100pp for 5
Newseum Tix		160
taxi and trans		300
Food		140
	<u>2150</u>	<u>7050</u>



World Affairs Council HILTON HEAD

September 1, 2023

Dear ATAX Committee,

We prepare Balance Sheets and Profit and Loss statements quarterly. Therefore, we do not have current year-to-date statements at this time.

Sincerely,

Leah Long

Executive Director

Office: 200 Main St #201M, HHI SC 29926

Mail: P.O. Box 22523H, HHI, SC 29925

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Balance Sheet as of		07/01/2021	06/30/2022 change in cash	WORLD AFFAIRS COUNCIL OF HILTON HEAD			
operating account		13984.91	\$ 11,843.86				
paypal account		36725.01	\$ 7,782.14				
savings/MM account		82764.34	\$ 98,837.74				
Total		<u>\$133,474.26</u>	<u>\$ 118,463.74</u>	<u>\$(15,010.52)</u>			
Restricted CFL	478/C9F4L	<u>\$174,610.00</u>	<u>\$ 132,689.00</u>	Receipts from 06/30/2021	TOTAL	receipts from 06/30/2022	Accrual Basis
Revenues							
Dues		\$ 39,610.00	\$ 53,625.00	\$ 93,235.00		\$ 93,235.00	
Deferred member dues		\$ 33,640.00		\$ 33,640.00	\$ 33,640.00	\$ -	
Even Speaker Series		\$ 5,670.00		\$ 5,670.00		\$ 5,670.00	
Guest Fees		\$ 1,775.00		\$ 1,775.00		\$ 1,775.00	
Contributions	outreach	\$ 5,457.00	\$ 5,109.00	\$ 10,566.00		\$ 10,566.00	
	programs	\$ 14,574.50		\$ 14,574.50		\$ 14,574.50	
	sponsorships	\$ 16,200.00	\$ 5,500.00	\$ 21,700.00		\$ 21,700.00	
	HCF related	\$ 600.00		\$ 600.00		\$ 600.00	
	deferred	\$ 7,833.00		\$ 7,833.00	\$ 7,833.00	\$ -	
Enhanced Global Speaker Series		\$ 20,558.64		\$ 20,558.64		\$ 20,558.64	
GD Sales		\$ 2,056.00	\$ 544.00	\$ 2,600.00		\$ 2,600.00	
Grant for marketing		\$ 8,894.00		\$ 8,894.00		\$ 8,894.00	
Speaker Book Sales		\$ 570.00		\$ 570.00		\$ 570.00	
Interest income		\$ 1,682.04		\$ 1,682.04		\$ 1,682.04	
Outreach Prior Years			<u>\$16,164.00</u>			<u>\$ 21,101.56</u>	
Revenues		<u>\$ 159,120.18</u>	<u>\$80,942.00</u>	<u>\$ 223,898.18</u>	<u>\$ 62,574.56</u>	<u>\$ 182,425.18</u>	
Expenses							
Friday Speaker Series		\$ (42,387.07)		\$ (42,387.07)		\$ (42,387.07)	
Global speakers		\$ (15,873.04)	\$ -	\$ (15,873.04)		\$ (15,873.04)	
ESS program		\$ (3,425.16)		\$ (3,425.16)		\$ (3,425.16)	
Great Decisions		\$ (1,993.00)		\$ (1,993.00)		\$ (1,993.00)	
Forums		\$ (533.90)		\$ (533.90)		\$ (533.90)	
Outreach AWQ and Model UN		\$ (5,628.44)		\$ (5,628.44)	0	\$ (5,628.44)	
Website and phone		\$ (7,769.98)		\$ (7,769.98)		\$ (7,769.98)	
Marketing		\$ (10,112.85)		\$ (10,112.85)		\$ (10,112.85)	
Marketing grant		\$ (3,385.00)		\$ (3,385.00)		\$ (3,385.00)	
Daily Chatter		\$ (750.00)		\$ (750.00)		\$ (750.00)	
Executive Director Compensation		\$ (60,600.00)		\$ (60,600.00)		\$ (60,600.00)	
Asst ED		\$ (3,956.50)		\$ (3,956.50)	-427.5	\$ (4,384.00)	June paid in July
National Meetings		\$ (3,789.48)		\$ (3,789.48)		\$ (3,789.48)	
membership meetings		\$ -		\$ -		\$ -	
National Dues		\$ (1,000.00)		\$ (1,000.00)		\$ (1,000.00)	
Supplies		\$ (2,510.33)		\$ (2,510.33)		\$ (2,510.33)	
Insurance		\$ (3,353.98)		\$ (3,353.98)		\$ (3,353.98)	
USPS		\$ (496.36)		\$ (496.36)		\$ (496.36)	
Sponsorship costs		\$ (482.03)		\$ (482.03)		\$ (482.03)	
Speaker Book costs		\$ (368.78)		\$ (368.78)		\$ (368.78)	
Paypal commissions		\$ (2,293.72)		\$ (2,293.72)		\$ (2,293.72)	
Other Miscellaneous Admin		\$ (3,421.08)		\$ (3,421.08)	700	\$ (2,721.08)	deposit on office
Expenses		<u>\$(174,130.70)</u>	<u>\$ -</u>	<u>\$(174,130.70)</u>	<u>\$ 272.50</u>	<u>\$(173,858.20)</u>	
Revenues over Expenses		<u>\$ (15,010.52)</u>	<u>\$80,942.00</u>	<u>\$ 49,767.48</u>	<u>\$ 62,302.06</u>	<u>\$ 8,566.98</u>	
Unrestricted fund balance			<u>\$52,532.26</u>			<u>\$ 56,161.68</u>	

Year 2020

	Ck #	AMT
Jan	2758	412.5
Feb	2769	382.5
Tracey Mrozek	2777	266.25
451-19-6447		0
15 Indian Hill Lane		0
29926	2791	135
July	2794	157.5
August	2796	93.75
Sept	2799	67.5
Oct	2803	60
Nove		0
Dec	2807	120
		<u>1695</u>

Maureen Korzik
31 Doubloon Drive
29928
152-52-0652

Jan	2756	4925
Feb	2768	4925
March	2776	4925
April	2784	2500
May	2786	2500
June	2788	4850
June	2790	4925
July	2793	4925
August	2795	4925
Sept	2798	4925
Oct	2802	4925
Nove	2805	4925
Dec	2810	4925
		<u>59100</u>

Year 2021

Jan	2814	105
Feb		0
March		0
April	2822	131.25
May		0
June	2828	300
July	2832	236.25
August	2836	90
Sept	2841	285
Oct	2846	412
Nove	2856	252
Dec		0
		<u>1811.5</u>

Jan	2813	5925
Feb	2817	4925
March	2821	4925
April	2824	4925
May	2867	4925
June	2831	4925
July	2834	4925
August	2839	4925
Sept	2844	4925
Oct	2852	4925
Nove	2859	4925
Dec	2869	4925
		<u>60100</u>

	beginning	3240.21					
	pay	-3240.21	51.76	12.83	2113.56	58.81	
	cash back	-314.89	270.18	23.2	60.87	83.74	
	charges	2450.25	64.22	22.6	315.02	522.86	
			147.62	1.99	4	1	
	ending bala	2135.36	340	83.74	14.84	666.41	
			157.91	58.93	15.89		
			15.89	203.29	9.48		
	666.41 pending		44.12		10		
	2623.38 new		183.7		12.71		
	-203.29 pay		120.32		1.99		
	-4.06 cash		121		29		
			183.7		36.02		
3082.44			12.71				
157.77			106		2623.38		
			40.6				
			1.99				
			529.72				
			58.81				
			2450.25				

July

balance per bank	15937.89
unpaid credit card charges	-8577.31
os check 2833	-600
os check 2835	-150
total	6610.58
balance per books	6610.58
Diff	0

January

balance per bank	
unpaid credit card charges	
checks O/S	
total	
balance per books	
Diff	

August

balance per bank	54634.34
unpaid credit card charges	-3237.06
os check 2833	-600
os check 2838	-125
2840	-90
total	50582.28
balance per books	50582.28
Diff	0

February

balance per bank	
unpaid credit card charges	
checks O/S	
total	
balance per books	
Diff	

September

balance per bank	42446.46
unpaid credit card charges	-2462.99
checks O/S 2833	-600
2843	-100
CC charge not posted	-59.7
total	39223.77
balance per books	39223.77
diff	0

March

balance per bank	
unpaid credit card charges	
checks O/S	
total	
balance per books	
Diff	

October

balance per bank	33579.97
checks O/S 2851	-49.6
2853	-2152.5
unpaid credit card charges	-57.16
unpaid credit card charges	-2839.2
cc charges not posted	-59.7
cc charges not posted	-1947.5
total	\$ 26,474.31
balance per books	26474.31
diff	0

April

balance per bank	
unpaid credit card charges	
checks O/S	
total	
balance per books	
Diff	

May

balance per bank	
unpaid credit card charges	
total	
balance per books	
Diff	

November

balance per bank	17441.12
checks O/S 2855	-1103.94
2858	-987
accrual WACA conf	-1500
accrual ext	-760
cc charges not posted	-59.7
cc charges not posted	-1947.5
unpaid credit card charges	-3240.75
total	7842.23
balance per books	7842.23
diff	0

June

balance per bank	
unpaid credit card charges	
checks O/S	
total	
balance per books	
Diff	

December

balance per bank CSB	4104
balance per bank WF	23700.84
checks O/S 2863	0
accrual FPC	-760
cc charges not posted	-4185.61
unpaid credit card charges	-59.7
Unpaid Amex	-60.62
total	22738.91
balance per books	22738.91
dif	0

January

balance per bank CSB	6661
balance per bank WF	6913.53
CSB OP due to MM	
checks O/S 2873	-1295.21
2875	(864.00)
accrual	-5175
Unpaid AMEX	-3240.21
charges not posted to AMEX	-52.76
Feb charges	620.89
total	3568.24
balance per books	3568.24
diff	\$ 0.00

AMEX Roll forward

balance	203.29
payment	-203.29
credits	-4.06
charges	3244.27
31-Jan	3240.21

equals 60.62 posted in Dec plus 142.67 posted in January

February

balance per bank CSB	7495.59
CSB OP due to MM	0
1004	-279.81
checks O/S 1006	-1591
1007	-408.75
accrual	-800
Unpaid AMEX	-2135.36
March Amex	588.53
	-1546.83

AMEX Roll forward

balance	3240.21
payment	-3240.21
credits	-314.89
charges	2450.25
28-Feb	2135.36

	total		2869.2				
	balance per books		3743.73				
	diff	\$	(874.53)				
March	balance per bank		13688.96				
	CSB OP due to MM		0				
	checks O/S	1017	-3182	AMEX Roll forward			
		1018	-5110.38				
		1019	-800	balance	2135.36		
	accrual		-547.2	payment	-1864.3		
	Unpaid AMEX	-3196.23		credits	-358.18		
	April Amex	231.6	-2964.63	charges	3283.35		
	accrued CFL		7873.64	3-31 bal	3196.23		
	total		8958.39				
	balance per books		9832.92				
	diff	\$	(874.53)				
April	balance per bank		13342.36				
	CSB OP due to MM		0				
	checks O/S			AMEX Roll forward			
				balance	3196.23		
	accrual		0	payment	-3196.23		
	Unpaid AMEX	-3709.67		credits	-59.48		
	May Amex	58.78	-3650.89	charges	3769.15		
				30-Apr	3709.67		
	total		9691.47				
	balance per books		10566				
	diff	\$	(874.53)				
May	balance per bank		9847.2				
	CSB OP due to MM						
	checks O/S	1030	-1300	AMEX Roll forward		B of A roll forward	
		1037	-1604.2				
		1040	-756.75	balance	3709.67	2556	
	accrual		-598.39	payment	-3702.9	-5112	
	Unpaid AMEX		-3387.52	credits	-478.16		
	june Amex charge		58.78	charges	3858.91	995.75	
	unpaid BA		1560.25	30-May	3387.52	-1560.25	
	total		3819.37				
	balance per books		4693.91				
	diff	\$	(874.54)				
				\$(8,024.49)	Pay Pall Issue		
June	balance per bank		10443.25				
	CSB OP due to MM						
	checks O/S	1044	0	AMEX Roll forward		B of A roll forward	
				balance	3387.52	-1560.25	
	accrual		-98.39	payment	-3209.02	0	
	Unpaid AMEX		-164.2	credits	-260.34	-490.85	
	july Amex charge		58.78	charges	246.04	466.69	
	unpaid BA		1584.41	30-Jun	164.2	-1584.41	
	total		11823.85				
	balance per books		12698.39				
	diff	\$	(874.54)				

	Total	Tax return line #1 Contrib, gifts and grants	#2 Program Service Revenue	#3 Membership Dues	#4 Investment Income
Income					
Dues	\$ 39,610.00			\$ 39,610.00	
Prepaid Dues	\$ 33,640.00			\$ 33,640.00	
Even Speaker Series	\$ 5,670.00		\$ 5,670.00		
Guest Fees	\$ 1,775.00		\$ 1,775.00		
Contributions	\$ 44,664.50	\$ 44,664.50			
prepaid outreach sponsorships					
Enhanced Speaker Series	\$ 20,558.64		\$ 20,558.64		
grants	\$ 8,894.00	\$ 8,894.00			unusual grant for Schedule A
Great Decisions	\$ 2,056.00		\$ 2,056.00		
prepaid GD					
MISC	\$ 2,252.04		\$ 570.00		\$ 1,682.04
total	\$ 159,120.18	\$ 53,558.50	\$ -	\$ 30,629.64	\$ -
				\$ 73,250.00	\$ -
					\$ 1,682.04

	LINE 11	13	14	15	Sch O 16	28	29	30
EXPENSES		ind contractor	rent	print, postage	other			
Friday speaker series	\$ (58,260.11)		-11781		\$ (46,479.11)	\$ (58,260.11)		
ESS program	\$ (3,425.16)				\$ (3,425.16)		\$ (3,425.16)	
Great Decisions	\$ (1,993.00)				\$ (1,993.00)	\$ (51,897.27)	\$ (1,993.00)	
Communications and other member service and forums	\$ (9,053.88)	\$ (750.00)			\$ (8,303.88)			
Outreach programs	\$ (5,628.44)				\$ (5,628.44)			\$ (5,628.44)
Executive Director	\$ (64,556.50)	\$ (64,556.50)						
marketing	\$ (13,497.85)				\$ (13,497.85)			
National dues and meetings	\$ (4,789.48)				\$ (4,789.48)			
insurance	\$ (3,353.98)				\$ (3,353.98)			
other administration	\$ (9,572.30)		-700	\$ (496.00)	\$ (8,376.30)			
interest ion loan	\$ -							
total	\$ (174,130.70)	\$ (750.00)	\$ (64,556.50)	\$ (12,481.00)	\$ (95,847.20)	\$ (58,260.11)	\$ (5,418.16)	\$ (5,628.44)

Revenue>Expenses	\$ (15,010.52)
Beginning cash	\$ 133,474.26
Ending cash	\$ 118,463.74

Notes Sale of books considered diminimus and not reported separately
Investment income includes cash back from credit card purchases - amounts not material to Schedule A
Other admin is mostly Paypal commissions ans supplies

DETAIL OF FRIDAY SPEAKER EXPENDITURES

DATE	SPEAKER	FEE	plane fare	car/limo	LODGING	MEALS	ETC	FPC RENTAL	FPC TECH	fpc sexton	total	Cumulative	per checkbook	Other Cost
														excludes fee
10/01/2021	Bolden	1000	490.32	1174.7	541.98	121.82	11.35	1071	400	160	4971.17			2340.17
10/22/2021	Levine	1000	1494.4	658.1	526.14	88.73		1071	400	160	5398.37	10369.54		2767.37
11/05/2021	Tierney	1000	641.81	462.13	745.92	125.43	116	1071	250	160	4572.29	14941.83		4322.29
11/19/2021	Menon	5000	-76.8	267.84	861.36	286	30	1071	400	160	7999.4	22941.23	-22941.23	7599.4
12/03/2021	Turkel	1000			1295.21	194.85		1071	250	120	3931.06	26872.29	(25,577.08)	
01/07/2022	Pandith	1000	0	0	0	0		0	0		1000	27872.29		
01/21/2022	Yacoubian	1000	322.8					0	-600	-160	562.8	28435.09		reverse accrual

July Receipts	PayPal	other	bank depo: 13-Jul	bank depo: 28-Jul	bank deposit	Total	
member dues	3125		1125	875		5125	
guest fees						0	
Contributions							
outreach	86		125			211	
program	200					200	
Sponsorship	1000					1000	
Board						0	
Travel Commission						0	
GD books	64		32			96	
Grant						0	
interest and cash back		0.7				0.7	
total	4475	0.7	1282	875		6632.7	
AUGUST	PayPal	other	deposit	refund		Cumulative	
			05-Aug	30-Aug		Total	
member dues	10290			875	-125	11040	16165 net of \$85 i
guest fees	200					200	200
Contributions						0	
outreach	371		100	185		656	867
program			5478.5			5478.5	5678.5
sponsorship				1500		1500	2500
Board						0	0
Travel Commission						0	0
GD books	192			32		224	320
Grant						0	0
Interest and Cash back		0.71				0.71	1.41
total	11053	0.71	5578.5	2592	-125	19099.21	25731.91
Sept	PayPal	cash back	bank depo:	bank depo:	bank deposit		
			17-Sep	interest	30-Sep		
member dues	10750		1375			12125	28290
guest fees	220					220	420
Contributions						0	
outreach	260		125			385	1252
program	80					80	5758.5
sponsorship	2000					2000	4500
Board						0	0
Travel Commission						0	0
GD books	352		30			382	702
Grant						0	0
bank interest and cash back		246.97		1		247.97	249.38
total	13662	246.97	1530	1	0	15439.97	41171.88
OCTOBER 2021	PayPal	23-Oct	05-Oct	interest	21-Oct		
member dues	2625	125	995			3745	32035
guest fees	-60		40			-20	400
Contributions						0	0
outreach			50			50	1302
program			100		16	116	5874.5
sponsorship					2500	2500	7000
Board						0	0
ESS						0	0
GD books	160		32			192	894
Grant						0	0
bank interest and cash back				0.89		0.89	250.27
total	2725	125	1217	0.89	2516	6583.89	47755.77
November	PAYPAL	depoit	deposit	bank			
		09-Nov	23-Nov				
member dues	2500	250	250			3000	35035
guest fees	225	80	75			380	780
Contributions						0	0
outreach		100				100	1402
program	776	2050	100			2926	8800.5
sponsorship	500	2000				2500	9500
Board	-177.89					-177.89	-177.89 19524.61

ESS		1235		360				1595	1595	
GD books		32	32					64	958	
Grant								0	0	
bank interest and cash back							0.87	0.87	251.14	
total		5090.11	4512	785			0.87	10387.98	58143.75	

DECEMBER

	PAYPAL	depoit 06-Dec	deposit 21-Dec	bank	deposit 28-Dec	PayPal adjust			
member dues	710	250					960	35995	
guest fees	75		35				110	890	
Contributions							0	0	
outreach							0	1402	
program	290				600		890	9690.5	
sponsorship	1000				500		1500	11000	
board						177.89	177.89	0	22092.5
ESS	1650		160				1810	3405	
GD books							0	958	
Grant							0	0	
bank interest and cash back				0.24	130.62	64.11	194.97	446.11	
CFL GSS reimbursement					12685		12685	12685	
total	3725	250	195.24	12815.62	1164.11	177.89	18327.86	76471.61	

JANUARY

	PAYPAL	depoit 14-Jan	deposit 31-Jan	bank					
member dues	1995						1995	37990	
guest fees	85						85	975	
Contributions							0	0	
outreach		2000					2000	3402	
program		109					109	9799.5	
sponsorship							0	11000	
board							0	0	24201.5
ESS	1285						1285	4690	
GD books	554	256	192				1002	1960	
Grant							0	0	
bank interest and cash back					91.12		91.12	537.23	
CFL GSS reimbursement							0	12685	
total	3919	2365	192	91.12	0	0	6567.12	83038.73	

FEBRUARY

	PAYPAL	deposit 10-Feb		bank					
member dues	1190	85					1275	39265	
guest fees	110	20					130	1105	
Contributions							0	0	
outreach							0	3402	
program							0	9799.5	
Sponsor		1500					1500	12500	
board							0	0	25701.5
ESS	630						630	5320	
GD books		64					64	2024	
Grant		8894					8894	8894	
bank interest and cash back			314.89	87.42			402.31	939.54	
CFL GSS reimbursement							0	12685	
Speaker book sales	50	250					300	300	
total	1980	10813	314.89	87.42			13195.31	96234.04	95934.04

MARCH

	PAYPAL	23-Mar	09-Mar	bank	amex	accrual			
member dues	345						345	39610	
guest fees	155	60	150				365	1470	
Contributions							0	0	
outreach		2000					2000	5402	
program	225	300					525	10324.5	
Sponsor		2000					2000	14500	
board							0	0	30226.5
ESS	280		70				350	5670	
GD books	32						32	2056	
Grant							0	8894	
bank interest and cash back			0.04	92.64	48.99		141.67	1081.21	
CFL GSS reimbursement						7873.64	7873.64	20558.64	

Speaker book sales				270					270	570	
total	1037	4360	490.04	92.64	48.99	7873.64			13902.31	110136.35	
APRIL	PAYPAL	deposit	deposits	bank	amex	deposits					
		04-Apr	18-Apr			28-Apr					
member dues									0	39610	
deferred dues	5220								5220	5220	
guest fees	180	60							240	1710	
Contributions									0	0	
outreach						45			45	5447	36821.5
program		3500	500			250			4250	14574.5	
Sponsor						1700			1700	16200	
HCF related		525	75						600	600	
Deferred	875								875	875	
ESS									0	5670	
GD books									0	2056	
Grant									0	8894	
bank interest and cash back				28.29	59.48				87.77	1168.98	
CFL GSS reimbursement									0	20558.64	
Speaker book sales									0	570	
total	6275	4085	575	28.29	59.48	1995			13017.77	123154.12	
May	PAYPAL	deposits	deposits	bank	amex	misc 2					
		13-May	31-May								
member dues									0	39610	
deferred dues	12470	6815	1160						20445	25665	
guest fees	50								50	1760	
Contributions									0	0	
outreach	10								10	5457	36231.5
program									0	14574.5	
Sponsor									0	16200	
HCF related									0	600	
Deferred	1570	1238	2155						4963	5838	
ESS									0	5670	
GD books									0	2056	
Grant									0	8894	
bank interest and cash back				29.07	75.39				104.46	1273.44	
CFL GSS reimbursement									0	20558.64	
Speaker book sales									0	570	
total	14100	8053	3315	29.07	75.39	0			25572.46	148726.58	
JUNE	PAYPAL	deposits	deposits	bank	amex	BA					
		11-Jun	30-Jun								
member dues									0	39610	
deferred memberships	6670	1305							7975	33640	
guest fees	15								15	1775	
Contributions									0	0	
outreach									0	5457	
program									0	14574.5	
Sponsor									0	16200	
HCF related									0	600	
Deferred	1195	800							1995	7833	
ESS									0	5670	
GD books									0	2056	
Grant									0	8894	
bank interest and cash back				46.38	69.13	293.09			408.6	1682.04	
CFL GSS reimbursement									0	20558.64	
Speaker book sales									0	570	
total	7880										
total	7880	2105	0	46.38	69.13	293.09			10393.6	159120.18	

as of april 24, 2021	FYE 2021	Preliminary		
	Forecast	2022		
accrual basis		Budget	20 @85	1700
Revenues			900 @125	112500
member dues	\$ -	\$ 114,200		
evening program fees	\$ 5,670.00	7500	300 @25	
Great Decisions fee	\$ -	2250	75 @30	
guest fees	\$ 1,470.00	3750	300 @12.50	
Contributions and Grants				
board and other	\$ 5,125.00	8000		
outreach	#VALUE!	6000		
CFL - global speaker	\$ 20,558.64	18450		
HCF match	0	1000		
Sponsorships	0	0		
A-Tax Grant	0	8900		
SC Cares Grant	\$ -	0		
Misc	0	0		
interest/caash back	200	200		
total	#VALUE!	\$ 170,250.00		
Expense			12000	honariaium
Member Programs			20650	T&E 1721/speak
Friday Speaker	12090	47650	15000	FPC
GSS	10090	18450		
Evening Speaker	0	3000	3 @1000	
Fall Forums	0	0		
Great decisions	1673	1800		
Summer Forum	0	0		
	<u>23,853</u>	<u>70,900</u>		
Outreach Program				
AWQ	0	8500		
Model UN	0	3500		
	<u>0</u>	<u>12000</u>		
Communications				
Website and phone	9050	6000		
Marketing	3770	4000		
Marketing grant - A-Tax	0	8900		
Daily Chatter	750	1250		
Membership mtgs	0	1000		
	<u>13570</u>	<u>21150</u>		
Administrative				
Executive Director	60100	61800	\$5150 per month average	
Asisstant to ED	900	3200		
National Meeting	123	3000		
WACA support	2000	0		
National Dues	1000	1000		
Insurance	3000	3200		
USPS	820	1000		
Supplies	500	1300		
interest	1517	0		
Paypal Commissions	1559	2200		
Misc	2000	2000		
	<u>73519</u>	<u>78700</u>		
TOTAL	<u>110,942</u>	<u>182,750</u>		
Revenues over (under) expense	#VALUE!	\$ (12,500)		

	Sponsors	Birdies	Program	Outreach	Year end appeal	Outreach Grant	total	
Pre July				5109				
July	1000		200	211			1411	
August	1500	5478.5		656			7634.5	
September	2000		80	385			2465	
October	2500		116	50			2666	
November	2500			100	2926		5526	
December	1500			0	890		2390	
January	0		109	0		2000	2109	24201.5
	<u>11000</u>	5478.5	505	1402	3816	2000		
reclass		-5478.5	5478.5	2000		-2000		
			3816		-3816			
	11000	0	9799.5	3402	0	0		24201.5
available for OR				8511				

	original	December thru june
based on 2021 contract	12000	
2020 was \$915/speaker for those that traveled (excluded Global) remaining 10 speakers	<u>12000</u>	<u>10000</u>
Bit of a guess; 2020 was 5300- includes cost of wwebinars for 2 Local Lfe ads	6000 3600	3000 1800
does not include travel for JL	2000	
Assumes no live meeting. Cost for virtual is unknown		
2020 dues - may increase???	900	900
fewer members - down from 1250	1000	1000
10% over PY	3300	3300
	500	500
	650	600
	1500	1200
(excludes commissions on prepaid 2022 memberships)	880	0
900 increase	60000	34475
2/3rds of 2020	1000	700
	<u>81330</u>	<u>47475</u>
loan interest Nov-June 8*115		920
	<u>93330</u>	<u>58395</u>
cash balance net of loan 30-Nov	\$ -	66940
CFL reimbursement for GSS	0	9144
less Acc Outreach	10	-12143
cash to cover estimated remaining costs	<u>10</u>	<u>63941</u>
does not include any interest on loan. Net unrestricted fund bal equivalent of 360 members	<u>93320</u>	5546

as of april 24, 2021	FYE 2021	Preliminary		
accrual basis	Forecast	2022		
Revenues		Budget	20 @85	1700
member dues	\$ 72,040.00	\$ 114,200.00	900 @125	112500
evening program fees	\$ 1,245.00	7500	300 @25	
Great Decisions fee	\$ 2,255.00	2250	75 @30	
guest fees	\$ 160.00	3750	300 @12.50	
Contributions and Grants				
board and other	\$ 5,125.00	8000		
outreach	\$ 5,714.00	6000		
CFL - global speaker	\$ 9,144.00	18450		
HCF match	0	1000		
Sponsorships	0	0		
A-Tax Grant	0	8900		
SC Cares Grant	\$ 49,788.09	0		
Misc	0	0		
interest/caash back	200	200		
total	\$ 145,671.09	\$ 170,250.00		
Expense			12000	honariaium
Member Programs			20650	FPC
Friday Speaker	12090	47650	15000	travel and expense
GSS	10090	18450		
Evening Speaker	0	1500	3 @500	
Fall Forums	0	0		
Great decisions	1673	1800		
Summer Forum	0	0		
	<u>23,853</u>	<u>69,400</u>		
Outreach Program				
AWQ	0	8500		
Model UN	0	3500		
	<u>0</u>	<u>12000</u>		
Communications				
Website and phone	9050	6000		
Marketing	3770	4000		
Marketing grant - A-Tax	0	8900		
Daily Chatter	750	1250		
Membership mtgs	0	1000		
	<u>13570</u>	<u>21150</u>		
Administrative			\$5150 per month	
Executive Director	60100	61800		
Asisstant to ED	900	3200		
National Meeting	123	3000		
WACA support	2000	0		
National Dues	1000	1000		
Chatter	750	1000		
Insurance	3000	3200		
USPS	820	1000		
Supplies	500	1300		
interest	1517	0		
Paypal Commissions	1559	2200		
Misc	2000	2000		
	<u>74269</u>	<u>79700</u>		
TOTAL	111,692	182,250		
Revenues over (under) expense	\$ 33,979.09	\$ (12,000.00)		

Department of the Treasury
Internal Revenue Service

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

▶ Do not enter social security numbers on this form, as it may be made public.
▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

A For the 2021 calendar year, or tax year beginning _____, **2021, and ending** _____, **20**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization _____ Number and street (or P.O. box if mail is not delivered to street address) _____ Room/suite _____ City or town, state or province, country, and ZIP or foreign postal code _____	D Employer identification number _____ E Telephone number _____ F Group Exemption Number ▶ _____
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G Accounting Method: Cash Accrual Other (specify) ▶ _____ **H** Check if the organization is **not** required to attach Schedule B (Form 990).

I Website: ▶ _____

J Tax-exempt status (check only one) – 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other _____

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ _____

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events:		
	6a	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
6b	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
6c	c Less: direct expenses from gaming and fundraising events	6c		
6d	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	7a Gross sales of inventory, less returns and allowances	7a		
7b	b Less: cost of goods sold	7b		
7c	c Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c		
8	8 Other revenue (describe in Schedule O)	8		
9	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶	9		
Expenses	10	10 Grants and similar amounts paid (list in Schedule O)	10	
	11	11 Benefits paid to or for members	11	
	12	12 Salaries, other compensation, and employee benefits	12	
	13	13 Professional fees and other payments to independent contractors	13	
	14	14 Occupancy, rent, utilities, and maintenance	14	
	15	15 Printing, publications, postage, and shipping	15	
	16	16 Other expenses (describe in Schedule O)	16	
17	17 Total expenses. Add lines 10 through 16 ▶	17		
Net Assets	18	18 Excess or (deficit) for the year (subtract line 17 from line 9)	18	
	19	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	
	20	20 Other changes in net assets or fund balances (explain in Schedule O)	20	
21	21 Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21		

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

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

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III . . .

What is the organization's primary exempt purpose? _____

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

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

28	_____		
	(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	
29	_____		
	(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30	_____		
	(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31	Other program services (describe in Schedule O)		
	(Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32	Total program service expenses (add lines 28a through 31a) <input type="checkbox"/>	32	

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		
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	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions <input type="text"/>		
b	Did the organization file Form 1120-POL for this year?		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved <input type="text"/>		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 <input type="text"/>		
b	Gross receipts, included on line 9, for public use of club facilities <input type="text"/>		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <input type="text"/> ; section 4912 <input type="text"/> ; section 4955 <input type="text"/>		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="text"/>		
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization <input type="text"/>		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		
41	List the states with which a copy of this return is filed <input type="text"/>		
42a	The organization's books are in care of <input type="text"/> Telephone no. <input type="text"/> Located at <input type="text"/> ZIP + 4 <input type="text"/>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <input type="text"/> See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	Yes	No
c	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country <input type="text"/>		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="text"/>		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		
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		
c	Did the organization receive any payments for indoor tanning services during the year?		
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions		

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	Yes	No
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Part VI Section 501(c)(3) Organizations Only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	47	Yes	No
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a		
b If "Yes," was the related organization a section 527 organization?	49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A ▶ **Yes** **No**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here		Date
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no.			

May the IRS discuss this return with the preparer shown above? See instructions ▶ **Yes** **No**

**SCHEDULE A
(Form 990)**

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization

Employer identification number

Part I 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 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 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.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 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.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)			<input type="checkbox"/>	<input type="checkbox"/>		
(B)			<input type="checkbox"/>	<input type="checkbox"/>		
(C)			<input type="checkbox"/>	<input type="checkbox"/>		
(D)			<input type="checkbox"/>	<input type="checkbox"/>		
(E)			<input type="checkbox"/>	<input type="checkbox"/>		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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 VI.)						
11 Total support. Add lines 7 through 10						

- 12** Gross receipts from related activities, etc. (see instructions) **12**
- 13 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

- 14** Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) **14** %
- 15** Public support percentage from 2020 Schedule A, Part II, line 14 **15** %
- 16a 33 1/3% support test—2021.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support test—2020.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test—2021.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test—2020.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 10 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
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						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
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						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on 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 (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>	<input type="checkbox"/>	<input type="checkbox"/>
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	<input type="checkbox"/>	<input type="checkbox"/>
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>	<input type="checkbox"/>	<input type="checkbox"/>
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	<input type="checkbox"/>	<input type="checkbox"/>
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	<input type="checkbox"/>	<input type="checkbox"/>
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>	<input type="checkbox"/>	<input type="checkbox"/>
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>	<input type="checkbox"/>	<input type="checkbox"/>
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>	<input type="checkbox"/>	<input type="checkbox"/>
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>	<input type="checkbox"/>	<input type="checkbox"/>
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	<input type="checkbox"/>	<input type="checkbox"/>
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	<input type="checkbox"/>	<input type="checkbox"/>
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	<input type="checkbox"/>	<input type="checkbox"/>
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>	<input type="checkbox"/>	<input type="checkbox"/>
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>	<input type="checkbox"/>	<input type="checkbox"/>
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>	<input type="checkbox"/>	<input type="checkbox"/>
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	<input type="checkbox"/>	<input type="checkbox"/>
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	<input type="checkbox"/>	<input type="checkbox"/>
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	<input type="checkbox"/>	<input type="checkbox"/>
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	<input type="checkbox"/>	<input type="checkbox"/>

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
	11a	<input type="checkbox"/>	<input type="checkbox"/>
b	A family member of a person described on line 11a above?		
	11b	<input type="checkbox"/>	<input type="checkbox"/>
c	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
	11c	<input type="checkbox"/>	<input type="checkbox"/>

Section B. Type I Supporting Organizations

		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
	1	<input type="checkbox"/>	<input type="checkbox"/>
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
	2	<input type="checkbox"/>	<input type="checkbox"/>

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
	1	<input type="checkbox"/>	<input type="checkbox"/>

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
	1	<input type="checkbox"/>	<input type="checkbox"/>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
	2	<input type="checkbox"/>	<input type="checkbox"/>
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
	3	<input type="checkbox"/>	<input type="checkbox"/>

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2	Activities Test. Answer lines 2a and 2b below.		
		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
	2a	<input type="checkbox"/>	<input type="checkbox"/>
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
	2b	<input type="checkbox"/>	<input type="checkbox"/>
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
	3a	<input type="checkbox"/>	<input type="checkbox"/>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
	3b	<input type="checkbox"/>	<input type="checkbox"/>

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D—Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2021		
a	From 2016		
b	From 2017		
c	From 2018		
d	From 2019		
e	From 2020		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2021 distributable amount		
i	Carryover from 2016 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2021 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2021 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2022. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2017		
b	Excess from 2018		
c	Excess from 2019		
d	Excess from 2020		
e	Excess from 2021		

**Schedule B
(Form 990)**

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990 or Form 990-PF.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2021

Name of the organization

Employer identification number

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization	Employer identification number
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-----	----- ----- -----	\$-----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$-----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$-----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$-----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$-----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$-----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$-----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- -----	\$-----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

**SCHEDULE O
(Form 990)**

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2021

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

**Open to Public
Inspection**

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

Employer identification number

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**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

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OMB No. 1545-0047

2021

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Employer identification number

Form **990-EZ**

**Short Form
Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

A For the 2020 calendar year, or tax year beginning July 1, 2020, 2020, and ending June 30, 2021, 20

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization ? World Affairs Council of Hilton Head
 Number and street (or P.O. box if mail is not delivered to street address) ? Post Office Box 22523 Room/suite _____
 City or town, state or province, country, and ZIP or foreign postal code Hilton Head Island, South Carolina 29925

D Employer identification number ? 570942426

E Telephone number 843-363-5299

F Group Exemption Number ? na

G Accounting Method: Cash Accrual Other (specify) ▶ _____

H Check if the organization is **not** required to attach Schedule B ? (Form 990, 990-EZ, or 990-PF).

I Website: ▶ wachhi@gmail.com

J Tax-exempt status (check only one) — 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other _____

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 170,410

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) <input type="checkbox"/> ?	
Check if the organization used Schedule O to respond to any question in this Part I <input checked="" type="checkbox"/>	
Revenue	1 Contributions, gifts, grants, and similar amounts received 1 69,601
	2 Program service revenue including government fees and contracts 2 12,233
	3 Membership dues and assessments 3 88,040
	4 Investment income 4 12
	5a Gross amount from sale of assets other than inventory 5a _____
	b Less: cost or other basis and sales expenses 5b _____
	c Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a) 5c 0
	6 Gaming and fundraising events:
	a Gross income from gaming (attach Schedule G if greater than \$15,000) 6a _____
b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) 6b _____	
c Less: direct expenses from gaming and fundraising events 6c _____	
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 6d 0	
7a Gross sales of inventory, less returns and allowances 7a _____	
b Less: cost of goods sold 7b _____	
c Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a) 7c 0	
8 Other revenue (describe in Schedule O) 8 524	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶ 9 170,410	
Expenses	10 Grants and similar amounts paid (list in Schedule O) 10 0
	11 Benefits paid to or for members 11 0
	12 Salaries, other compensation, and employee benefits <input type="checkbox"/> ? 12 0
	13 Professional fees and other payments to independent contractors <input type="checkbox"/> ? 13 61,135
	14 Occupancy, rent, utilities, and maintenance 14 0
	15 Printing, publications, postage, and shipping 15 1,682
	16 Other expenses (describe in Schedule O) <input type="checkbox"/> ? 16 52,629
	17 Total expenses. Add lines 10 through 16 ▶ 17 115,446
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 9) 18 54,964
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 78,510
	20 Other changes in net assets or fund balances (explain in Schedule O) 20 0
	21 Net assets or fund balances at end of year. Combine lines 18 through 20 ▶ 21 133,474

Part II Balance Sheets (see the instructions for Part II)
 Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	178,510	22 133,474
23 Land and buildings	0	23 0
24 Other assets (describe in Schedule O)	0	24 0
25 Total assets	178,510	25 133,474
26 Total liabilities (describe in Schedule O)	100,000	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	78,510	27 133,474

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

What is the organization's primary exempt purpose? Community Education

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

Expenses
 (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

28 WACHH recruits reknown speakers to Hilton Head Island to present issues related to current foreign affairs. We scheduled 14 presentations and due to Covid 19, all presentations were made remotely via webinar or similar technology. Actual viewing was accessible during or after the presentation to 600 members	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	26,805
29 WACHH normally conducts forums, discussion groups with as many as 25 events per fiscal year. Discussions events were limited to topics contained in WACA Great Decisions material, and were conducted virtually with volunteer facilitators.	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	1,673
30 WACHH historically provides outreach support to local high schools through monetary support of model UN programs, and the Academic World Quest competition of local student teams with the winning team participating nationally. Due to Covid, the high schools did not participate in either program in 2021.	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	0
31 Other program services (describe in Schedule O)	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	0
32 Total program service expenses (add lines 28a through 31a)		32	28,478

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

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
See attached chedule	5	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		<input checked="" type="checkbox"/>
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		<input checked="" type="checkbox"/>
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)?		<input checked="" type="checkbox"/>
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		<input checked="" type="checkbox"/>
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		<input checked="" type="checkbox"/>
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		<input checked="" type="checkbox"/>
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0		
b	Did the organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		<input checked="" type="checkbox"/>
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved 38b		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 39a		
b	Gross receipts, included on line 9, for public use of club facilities 39b		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		<input checked="" type="checkbox"/>
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0		
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ 0		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		<input checked="" type="checkbox"/>
41	List the states with which a copy of this return is filed ▶ South Carolina		
42a	The organization's books are in care of ▶ David Borghesi Telephone no. ▶ 843-363-5299 Located at ▶ 170Club Course Drive, Hilton Head Island SC ZIP + 4 ▶ 29928-3150		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		<input checked="" type="checkbox"/>
c	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ▶		<input checked="" type="checkbox"/>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		<input checked="" type="checkbox"/>
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		<input checked="" type="checkbox"/>
c	Did the organization receive any payments for indoor tanning services during the year?		<input checked="" type="checkbox"/>
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		<input checked="" type="checkbox"/>
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		<input checked="" type="checkbox"/>
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions		<input checked="" type="checkbox"/>

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

46	Yes	No
		<input checked="" type="checkbox"/>

Part VI Section 501(c)(3) Organizations Only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

47	Yes	No
		<input checked="" type="checkbox"/>

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48	Yes	No
		<input checked="" type="checkbox"/>

49a Did the organization make any transfers to an exempt non-charitable related organization?

49a	Yes	No
		<input checked="" type="checkbox"/>

b If "Yes," was the related organization a section 527 organization?

49b	Yes	No
		<input type="checkbox"/>

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer: David W. Borghesi Date: Sept 28, 2021

David Borghesi, Treasurer
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: _____ Preparer's signature: _____ Date: _____ Check if self-employed PTIN: _____

Firm's name: _____ Firm's EIN: _____

Firm's address: _____ Phone no.: _____

May the IRS discuss this return with the preparer shown above? See instructions Yes No

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization World Affairs Council of Hilton Head	Employer identification number 57-0942426
--	--

Part I 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 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 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.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 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.)
- 8 A community trust described in **section 170(b)(1)(A)(vii).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% 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 33 1/3% 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

(Complete only if you checked the box on line 10 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	133303	183923	133324	145614	108377	704541
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	12269	11055	21106	17962	12233	74625
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						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	145572	194978	154430	163576	120610	779166
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				22093	9144	
c Add lines 7a and 7b	0	0	0	22093	9144	31237
8 Public support. (Subtract line 7c from line 6.)						747929

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6	145572	194978	154430	163576	120610	779161
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	43	35	27	38	12	155
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	43	35	27	38	12	155
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 (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	145615	195013	154457	163614	120622	779316
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	95.97 %
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	99.98 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	.02 %
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	.02 %
19a 33 1/3% support tests—2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support tests—2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	<input type="checkbox"/>	

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Name of the organization
World Affairs Council of Hilton Head

Employer identification number
57-0942426

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization World Affairs Council of Hilton Head	Employer identification number 57-0942426
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-----	Community Foundation of the Lowcountry ----- 4 Northridge Drive Suite A ----- Hilton Head Island SC 29925 -----	\$----- 9,144	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- -----	\$-----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- -----	\$-----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- -----	\$-----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- -----	\$-----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- -----	\$-----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- -----	\$-----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization

World Affairs Council of Hilton Head

Employer identification number

57-0942426

Part I line 1: Included is an unusual grant of \$49788 from South Carolina CARES Coronavirus Relief Fund

Part I line 16: Other expenses include program expenses of \$28478, national dues and support of \$3128, Insurance of \$2970, communication,
website and other member services of \$9,088, marketing of \$4,035, interest on loan of \$1,517, and administration/general of \$3,413.

Part II: WACHH accounts for assets and liabilities on a cash basis and it has no other assets other than cash. Membership dues are billed in
May for the succeeding fiscal and program year. After receipt of the SC CARES grant, the EIDL loan was paid off. As of June 30, 2021,
approximately \$77,400 of cash relates to FYE 2022 programs.

Part III: WACHH is affiliated with World Affairs Council of America. WACA and WACHH provide information and education to its members
(approximately 600) and the broader community about current foreign affairs and US policy positions and issues.

Part IV: WACHH list of Board members and its Board officers are separately attached.

Short Form

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2019

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning July 1, 2019 , 2019, and ending June 30, 2020 , 20

B Check if applicable:

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

C Name of organization
World Affairs Council of Hilton Head
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
PO Box 22523
 City or town, state or province, country, and ZIP or foreign postal code
Hilton Head Island, South Carolina 29925

D Employer identification number
57-0942426

E Telephone number
843 363 5299

F Group Exemption Number ▶ **na**

G Accounting Method: Cash Accrual Other (specify) ▶ _____

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ **wachhi@gmail.com**

J Tax-exempt status (check only one) - 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other _____

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ **163,614**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
 Check if the organization used Schedule O to respond to any question in this Part I

		1	2	3	4	5a	5b	5c	6a	6b	6c	6d	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Revenue	1	Contributions, gifts, grants, and similar amounts received																								44,744			
	2	Program service revenue including government fees and contracts																								15,535			
	3	Membership dues and assessments																								100,870			
	4	Investment income																								38			
	5a	Gross amount from sale of assets other than inventory																											
	b	Less: cost or other basis and sales expenses																											
	c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)																								0			
	6	Gaming and fundraising events:																											
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)																											
	b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)																											
c	Less: direct expenses from gaming and fundraising events																												
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)																								0				
7a	Gross sales of inventory, less returns and allowances																								2,120				
b	Less: cost of goods sold																								1,783				
c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)																								337				
8	Other revenue (describe in Schedule O)																								307				
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8																								161,831				
Expenses	10	Grants and similar amounts paid (list in Schedule O)																								0			
	11	Benefits paid to or for members																								0			
	12	Salaries, other compensation, and employee benefits																								0			
	13	Professional fees and other payments to independent contractors																								61,799			
	14	Occupancy, rent, utilities, and maintenance																								18,185			
	15	Printing, publications, postage, and shipping																								1,744			
	16	Other expenses (describe in Schedule O)																								77,402			
17	Total expenses. Add lines 10 through 16																								159,130				
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 9)																								2,701			
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)																								75,809			
	20	Other changes in net assets or fund balances (explain in Schedule O)																											
	21	Net assets or fund balances at end of year. Combine lines 18 through 20																								78,510			

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	75,809	178,510
23	Land and buildings	0	0
24	Other assets (describe in Schedule O)	0	0
25	Total assets	75,809	178,510
26	Total liabilities (describe in Schedule O)	0	100,000
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	75,809	78,510

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? Community Education

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

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

28	WACHH recruits internationally known speakers to Hilton Head Island to present issues related to current foreign affairs. There were 14 in person presentations scheduled, however, due to COVID-19, several presentations were presented remotely via webinar or similar technology. Normal average attendance is 650. (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	47,670
29	WACHH conducts a series of forums and discussions featuring local experts on international relations related to foreign affairs or local governmental affairs. There are scheduled as many as 25 individual events attended by up to 100 participants. COVID-19 impacted events scheduled for March through June (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	8,333
30	WACHH provides outreach support to high school students through monetary support of Model UN programs and organizing the annual Academic World Quest competition with local high school teams, the winner competing in Washington DC. The national competition was cancelled due to COVID-19 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	6,158
31	Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	0
32	Total program service expenses (add lines 28a through 31a)	32	62,161

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
See list attached	5	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		✓
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	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		✓
35b			✓
35c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	0
37b	Did the organization file Form 1120-POL for this year?		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		✓
38b	If "Yes," complete Schedule L, Part II, and enter the total amount involved	38b	
39a	Section 501(c)(7) organizations. Enter:	39a	
a	Initiation fees and capital contributions included on line 9		
b	Gross receipts, included on line 9, for public use of club facilities	39b	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <input type="text" value="0"/> ; section 4912 <input type="text" value="0"/> ; section 4955 <input type="text" value="0"/>		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	✓
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization		0
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	✓
41	List the states with which a copy of this return is filed	South Carolina	
42a	The organization's books are in care of	David Borghesi	
	Located at	170 Club Course Drive, Hilton Head Island SC	
	Telephone no.	843 363 5299	
	ZIP + 4	29928 3150	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	42b	✓
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
c	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country	42c	✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year	43	<input type="checkbox"/>
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	✓
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	✓
c	Did the organization receive any payments for indoor tanning services during the year?	44c	✓
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	✓
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	✓
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45b	✓

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		✓

Part VI Section 501(c)(3) Organizations Only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

	Yes	No
47		✓

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		✓
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49a Did the organization make any transfers to an exempt non-charitable related organization?

49a		✓
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b If "Yes," was the related organization a section 527 organization?

49b		
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50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 ▶ 0

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a completed Schedule A ▶ Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here
 Signature of officer: *David A. Borghesi*
 Date: *July 15, 2020*
 Type or print name and title: **David Borghesi, Treasurer**

Paid Preparer Use Only
 Print/Type preparer's name: _____ Preparer's signature: _____ Date: _____
 Check if self-employed PTIN: _____
 Firm's name: _____ Firm's EIN: _____
 Firm's address: _____ Phone no.: _____

May the IRS discuss this return with the preparer shown above? See instructions ▶ Yes No

**WORLD AFFAIRS COUNCIL OF HILTON HEAD
Board of Directors Meeting- Via Email
August 28, 2023**

Attending via email:
Peter Cooper
John Gilbert
Rick Mitchell
Rich Moniuszko
Colin Moseley

Bill Patterson
Cindy Petitt
Leah Long-ED

An email was sent to all Board members. Motions in bold.

It was moved (Mitchell) and seconded (Copper) that the Board allow the Executive Director (Long) to submit a grant to the Town of Hilton Head ATAX committee. The motion passed unanimously.

Next meeting: September 14, 2023, at 10:00 am at the WACHH office.

ATAX 2023 Funds Executive Summary

Topic	The Plan	The Budget	The Actual	Results When possible, provide planned results vs. actual results, and/or current year vs. prior year results.
Local Life magazine advertisement May 2023	Place ad to highlight our membership drive and member benefits	\$2,000	\$1,966.50	At the end of May 2022 we had 165 members for the upcoming season and end of May 2023 we had 148 members for upcoming season. We do not find Local Life to be effective advertising and will not use future ATAX funds for this purpose, if granted.
Local Life magazine advertisement September 2023	Place ad to highlight three of our speakers for the 2023-2024 season and encourage membership	\$2,000	Placed but not yet billed	Will not have results until our speaker program begins in October 2023. Will measure in number of guest/members that register and select "Magazine" as reason on the survey.
Advertise in the Hilton Head Symphony Orchestra program Fall 2023	Feature in the HHSO program to expand visibility in a different/new audience	\$1,075 (partial reimbursement from ATAX)	\$1,075 (partial reimbursement from ATAX)	Program begins in October 2023
Total:		\$5,075	n/a	



State of South Carolina
Office of the Secretary of State
The Honorable Mark Hammond

10/28/2019

World Affairs Council of Hilton Head
David A Borghesi
170 CLUB COURSE DR
HILTON HEAD, SC299283150

RE: Registration Confirmation

Charity Public ID: P17979

Dear David A Borghesi :

This letter confirms that the Secretary of State's Office has received and accepted your Registration, therefore, your charitable organization is in compliance with the registration requirement of the "South Carolina Solicitation of Charitable Funds Act." The registration of your charitable organization will expire on 11/15/2020.

If any of the information on your Registration form changes throughout the course of the year, please contact our office to make updates. It is important that this information remain updated so that our office can keep you informed of any changes that may affect your charitable organization.

If you have not yet filed your annual financial report or an extension for the annual financial report, the annual financial report is still due 4½ months after the close of your fiscal year.

- Annual financial reports must either be submitted on the Internal Revenue Service Form 990 or 990-EZ or the Secretary of State's Annual Financial Report Form.
- If you wish to extend the filing of that form with us, please submit a written request by email or fax to our office using the contact information below. Failure to submit the annual financial report may result in an administrative fine of up to \$2,000.00.

If you have any questions or concerns, please visit our website at www.sos.sc.gov or contact our office using the contact information below.

Sincerely,

A handwritten signature in black ink, appearing to read "K. Wickersham", with a long horizontal line extending to the right.

Kimberly S. Wickersham
Director, Division of Public Charities