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Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

2008

Open to Public

B Check if applicable Address change Name change Initial return Termination Amended return Application pending I Tax-exempt status J Website: ► www K Type of organization Part I Summ 1 Briefly de The Tige County, organization	I21 Innovation Drive City or town, state or country, and Irvine, CA 92617 F Name and address of principal offi GREG MCLAUGHLIN 121 INNOVATION DRIVE SUITE 1! IRVINE, CA 92617 F 501(c) (3) ◀ (insert no) 4947(a)(1) TWLC com Corporation Trust Association Other ary scribe the organization's mission or mo Woods Learning Center Foundation is a	mail is not delivered to street address I ZIP + 4 cer 50) or	H(a) Is the affiliation of the second of the	20-067781! E Telephone nu (949) 725-3 G Gross receipts \$	for Yes No d? Yes No (see instructions)		
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1 Briefly de The Tige County, C	scribe the organization's mission or mo Woods Learning Center Foundation is a	-			- State of legal dofficile of		
County, County	-	non-profit public benefit corp					
O Check th	zamorina -		oration which	operates a scho	ool facility in O range		
	s box 🔭 if the organization discontinu	ed its operations or disposed	of more than	25% of its asset	ts		
~	fvoting members of the governing body	(Part VI, line 1a)		3	2		
4 Number of 5 Total num 6 Total num	findependent voting members of the go	verning body (Part VI, line 1b)	. 4	2		
5 Total nur	nber of employees (Part V , line 2a) .			5	4		
្តី 6 Total nur	nber of volunteers (estimate if necessar	y)		6	16		
	ss unrelated business revenue from Par	t VIII, line 12, column (C) .		7a			
b Net unrei	ated business taxable income from Forr	n 990-T, line 34		7b			
			Prio	r Year	Current Year		
8 Contrib	itions and grants (Part VIII, line 1h)			2,687,190	3,296,541		
	service revenue (Part VIII, line 2g) .			, ,	, ,		
>	ent income (Part VIII, column (A), line			1,688,640	-1,073,032		
出 Other re	venue (Part VIII, column (A), lines 5, 6			16,783	9,399		
	venue—add lines 8 through 11 (must eq			,			
I				4,392,613	2,232,908		
13 Grants a	and sımılar amounts paıd (Part IX, colun	nn (A), lines 1-3)		11,700	1,290		
14 Benefits	paid to or for members (Part IX, columi	n (A), line 4)			0		
15 Salaries	, other compensation, employee benefit	s (Part IX, column (A), lines 5	-	1,253,252	1,443,817		
10) 16a Profess b Total fund	and fundracing face (Dart IV column /	۸		1,253,252			
16a Profess	onal fundraising fees (Part IX, column (0		
	raising expenses (Part IX, column (D), line 25)						
	kpenses (Part IX, column (A), lines 11a			2,633,018	2,407,989		
	penses Add lines 13-17 (must equal F			3,897,970	3,853,096		
	e less expenses Subtract line 18 from l	ine 12		494,643	-1,620,188		
වීම ශසි			Beginni	ng of Year	End of Year		
Social 20 Total as to	sets (Part X, line 16)			36,696,378	37,082,713		
受力 21 Total lia	bilities (Part X, line 26)			11,652,543	12,457,290		
董量 22 Netass	ets or fund balances Subtract line 21 fr	om line 20		25,043,835	24,625,423		
Part III Signa	ture Block			<u> </u>			
_	alties of perjury, I declare that I have examined	this return, including accompanying	schedules and s	tatements, and to th	ne best of my knowledge		
and belief	, it is true, correct, and complete Declaration of	preparer (other than officer) is based	d on all informat	on of which prepare	r has any knowledge		
Sign				08-18			
Here F Signat	ure of officer		Date				
	y McLaughlin PRESIDENT & CEO						
Type o	r print name and title			_			
Preparer's			Check If	Preparer's identify (see instructions)			
Paid signature	7		elf- mpolyed 🕨 🦳	(see instructions)			
	ie (or yours 👠 KPMG LLP		•				
llse Onlv ∣ıf self-emp	loyed),	ıf self-employed), EIN					
l addicas, a	טומווע איי איי איי איי איי איי איי איי איי אי						
	Los Angeles, CA 90071			Phone no 🕨 (21	 !3) 972-4000		

	990 (2008)	ent of Drogram Sorvice A	Accomplishments (see upstru	ections \	Page 2
1		the organization's mission	Accomplishments (see ınstru	cuons.)	
			nia, at which it will maintain a regula		nd normally have a
regu	arly enrolled body	of students in attendance, with	in the meaning of secion 170(b)(1)	(A)(II) of the Code	
	Did the organizati	on undertake any significant ni	rogram services during the year wh	ıch were not listed on	
_	the prior Form 99				Yes ✓ No
3			sıgnıfıcant changes ın how ıt condu • • • • • • • • • •		Yes Vo
	If "Yes," describe	these changes on Schedule O			
4	Section 501(c)(3) and 501(c)(4) organizations a	each of the organization's three larg and section 4947(a)(1) trusts are r venue, if any, for each program serv	required to report the amou	
4a	vision of Tiger Wood community needs be the 21st century lead grade students and as a career, and progives students and or classification. While providing them the development, scient TWLC helps middle Exploration Program member in a self-sed different career optic Robotics. The curriculation of the field trips in the field trips in the field trips in the field trips in the field trips. The curriculation of the curriculation of the field trips in the field trips in the field trips in the field trips. The field trips in the field trips in the field trips in the field trips. The field trips in the field trips in the field trips in the field trips. The field field in the field trips in the field trips in the field trips in the field trips. The field fi	INING CENTER OVERVIEW The Tiger Mass to provide a safe place for children y involving educators, students and parning and work environment. TWLC Datheir teacher with an interactive, authovide them with a variety of hands-on sportunity to explore ocean life and in students participate in this hands-on sknowledge and skills to recreate the Tice and the use of technology in the reand high school students recognize the (CEP.) Students utilize technology to elected career field of interest. Each secons Thematic classrooms include. Column gives students multiple opportunity eternary science will conduct dissect that also provides opportunities for students have the opportunity to exploit swith a science, math or technology its them with their future plans while of Computer Clubhouse program is open under focused on digital art, web design udents including filmmaking and a new are offered by TWLC. These programs or orgams includes local TWLC members and on school campuses, based on in California during the summer monthis, and engineering, and much more. The University of Wisconsin, Madison, Inc. Colf COP/CEP Golf Academy - Students including the summer monthis, and engineering, and much more. The University of Wisconsin, Madison, Inc. Colf COP/CEP Golf Academy - Students and engineering, and much more. The United States Golf Association, of the TWLC and expose the game of grazility than through capames, contests, snacks and participated in the full graders in Orange County members and non-members. Typically involve games, contests, snacks and participated in the full graders in Orange County members and non-members. Typically involve games, contests, snacks and participated in the full graders in Orange County members and non-members. Typically involve games, contests, snacks and participated in golf course outings to local golf of the golf course outings to local golf of the golf course are executive, high every contests available to the solf course available to the golf course outings to local golf of the golf cours	Accords Learning Center is a 35,000 sq. ft. 14 to learn. High-quality Educational Enrichment arents to create an interactive program that ay Program - Career Orientation Program tentic learning experience. Crime Lab 101 is activities including fingerprinting, DNA and cludes exploration of oceanic regions, squiscience and technology workshop their class. WLC experience in their classroom. Profess gular classroom environment. TWLC Aftersolar potential and identify their interests throughout careers by utilizing the complete homework, conduct research, and even-week session, student members may minimize to learn about careers by utilizing the class throughout Southern California to lead target underrepresented populations of students throughout Southern California to lead target underrepresented populations of students careers, participate in an introductory of emphasis. The objective of the fieldtrip is giving them the understanding of what the into all current and past TWLC member sturn, video production, video game creation, will be sufficient and site needs. TWLC Summer Programs include golf as a recreational and WLC also enables students to participate in an anguage immersion camps at Concordia Ladents enrolled in a TWLC core program lear (the longest swing) and basic character engine, open practice sessions and by qualifying we are able to take the TWLC Golf Program folf. The TWLC Coordinator of Golf Outreach of the game are assessed and recognized west to advance through the program starting and the full swing. Since December Weekend Golf Clinic - Held each weekend yield on Saturdays, we offer a morning secondary and off the course with the character as elected. Students who have earned Master's on and off the course with the character as elected. Students are H. G. Dad Miller, Tustin Fooders and students to strengthen their o	ent - The Learning Center metho t is meaningful and relevant to y The TWLC Career Orientation Pro to a series of lessons that teach st alysis, microscope use, and chroi alysis, microscope use, and chroi didissection, analysis of sand sa sroom teacher receives professio soinal Development includes way chool Program - Career Explorati ringh a hands-on, authentic learn and are given the opportunity to class choose to learn about a car greeneurship, Nutrition and Fitness computer and completing a hand and to visit a nearby pet hospita arin about the benefits of TWLC in dients and encourage them to pu delege preparation workshop and to provide participants with the y need to do to become a TWLC dents and allows for free explora music/sound production, and mi grograms In addition to program ents from throughout Southern C rogramming TWLC provides a va activity, week long classes in film diverse activities around the cou and using entity of the player development of the basics of golf instruction T ducation/etiquette Students are greated for the player development pr on the road By visiting local ek h visits 5th and 6th graders in Or 2008, the TWLC Outreach effort of, golf clinics are offered to provice ession and an afternoon session experience Player Development F with a special TWLC Tour Card E greater for the player development of the special TWLC Tour Card E greater for the player development of the special TWLC Tour Card E greater for the player development of the special tway of the player development	d is focused on assessing local roung people as they navigate gram (COP) provides local fifth tudents about forensic science matography Marine Science mples, and marine life nal development focused on its to incorporate positive youth ion Program After school, the ing experience in the Career onnect to a mentor or staff eer by selecting from among 50 st., Universal Science, and its on project For example, all and observe a pet inembership through a series of ursue a college education participate in a select variety of knowledge of an additional member TWLC Computer ation of new and innovative uith more A variety of clubs are ining, various community ings for student members. The california Programs are held in interty of programs to students in production, aerospace, health untry including the College Seminar at the United States Air his includes origin of golf, encouraged to continue their original Golf Outreach Programs sementary schools we are able to ange County with a 3 phase thas introduced the game of the beginning and advanced golf that run for three hours each Program - Through a tiered ach level requires a arough Player Class ed competency in all the facets Formal assessment dates will ent Program's Level 2 are availability and course County due to transportation or Coyote Hills Golf Course, Aliso
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	Other program s	ervices (Describe in Schedule	0)		
	(Expenses \$	•	•) (Revenue \$)
4e	Total program se	ervice expenses ⊁ \$	3,293,226 <i>(Must equal Part IX, Li</i>	ne 25, column (B).)	

art TV	Check	list of	Dequired	Schedules
	CHECK	HISL OI	<u> </u>	Juliculies

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[4]{3}$	10		No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Νo
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Νο

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νo
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νo
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

	1990 (2008)			Page :
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			l
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal		Yes	No
	of U.S. Information Returns. Enter -0- if not applicable			
	1a 15			
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country 🕨			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		
8	required?	711		
	business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	_		
a	Did the organization make any taxable distributions under section 4966?	9a		
b 10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b			
J	facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the vear			

(949) 725-3003

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Se	ction A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, process, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body 1a 26			
b	Enter the number of voting members that are independent 1b 26			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? \cdot \cdot	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?	9a		Νο
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		No
Se	ction B. Policies	ı		
			Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►CA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ie orga	ınızatıor	n
	GREG MCLAUGHLIN 121 INNOVATION DRIVE SUITE 150 IRVINE, CA 92617			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

Check this box if the	e organizat	ion did not compensate any officer,	dırec	tor,	trus	tee o	r ke	y employee		
		(C) Position (check all that apply)						(5)	(=)	(F)
(A) Name and Title	(B) Average hours per week	x <u>I</u> ndividual	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
RICHARD BAILY DIRECTOR	1 0	Х						0	0	0
SANDRA BARRY DIRECTOR	1 0	Х						0	0	0
MARIAN BERGESON DIRECTOR	1 0	Х						0	0	0
RAJ S BHATHAL DIRECTOR	1 0	Х						0	0	0
AVERY BROWN DIRECTOR	1 0	Х						0	0	0
LINDSAY DAVENPORT DIRECTOR	1 0	Х						0	0	0
MICHAEL V DRAKE DIRECTOR	1 0	Х						0	0	0
DALE L DYKEMA DIRECTOR	1 0	Х						0	0	0
KARINA HAMILTON DIRECTOR	1 0	Х						0	0	0
BRIAN HIRTH DIRECTOR	1 0	Х						0	0	0
CHRISTOPHER J HUBMAN DIRECTOR	1 0	Х						0	0	0
DONALD P KENNEDY DIRECTOR	1 0	Х						0	0	0
JERRY E MANDEL DIRECTOR	1 0	Х						0	0	0
MICHAEL D MCKEE DIRECTOR	1 0	Х						0	0	0
CURT PRINGLE DIRECTOR	1 0	Х						0	0	0
MARIO RODRIGUEZ DIRECTOR	1 0	Х						0	0	0
TIM J RYAN DIRECTOR	1 0	Х						0	0	0

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

		(C) Position (check all that apply)						(D)	(E)	(F) Estimated
(A) Name and Title	(B) Average hours per week	x Individual	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W- 2/1099- MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	amount of other compensation from the organization and related organizations
LAURA SANFORD DIRECTOR	1 0	Х						0	0	(
DON SODARO DIRECTOR	1 0	Х						0	0	(
MARK STEINBERG DIRECTOR	1 0	Х						0	0	(
TODD C THEODORA DIRECTOR	10	Х						0	0	(
PETER V UEBERROTH DIRECTOR	1 0	Х						0	0	(
BOB WALTOS DIRECTOR	1 0	Х						0	0	(
LAYSHA WARD DIRECTOR	1 0	Х						0	0	(
KULTIDA WOODS DIRECTOR	1 0	Х						0	0	(
RHONDA ZYGOCKI DIRECTOR	1 0	Х						0	0	(
GREGORY T MCLAUGHLIN PRESIDENT, SECRETARY, & CEO	10			х				0	469,569	39,389
KATHERINE BIHR EXECUTIVE DIRECTOR	40 0			Х				134,213	0	14,091
JIN THATCHER TREASURER	1 0			Х				0	119,400	24,355
LINDSAY FEILER ASSISTANT SECRETARY	1 0			х				0	58,269	10,387
1b Total					•	-		134,213	647,238	88,222

compensation from the organization►1

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		Νο
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual			
	murvidual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νο

Section	R	Ind	ana	nden	t Car	itra	cto	re
Section	D .	1111						-

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
VALLEY CREST GOLF COURSE MAINTENANC PO BOX 57515 LOS ANGELES, CA 900747515	REPAIRS & MAINT	112,769

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ▶1

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
######################################	1a	Federated campaigns 1a					
<u> </u>	ь	Membership dues 1b					
contributions, giffs, grants and other similar amounts	c	Fundraising events 1c					
	d	Related organizations 1d	2,688,935				
<u>ير ≣</u>	e	Government grants (contributions) 1e					
등교	f	All other contributions, gifts, grants, and 1f	607,606				
<u> </u>		sımılar amounts not included above					
<u>=</u> =	g	Noncash contributions included in lines 1a-1f \$69,300					
é E	h	Total. Add lines 1a-1f	▶	3,296,541			
			Business Code				
∃e	2a		Busiliess Code				
že.		-					
윤	Ь						
35	C						
37	d						
Ē	e						
Program Service Revenue	f	All other program service revenue					
Š	g	Total. Add lines 2a-2f		0			
	3	Investment income (including dividen					
		and other similar amounts)	. I	198,063			198,063
	4	Income from investment of tax-exempt bond		0			
	5	Royalties	▶	0			
		(ı) Real	(II) Personal				
	6a	Gross Rents					
	ь	Less rental					
	_c	expenses Rental income					
		or (loss)					
	d	Net rental income or (loss)	1				
		(i) Securities Gross amount 17,141,656	(II) O ther				
	7a	from sales of					
		assets other than inventory					
	ь	Less cost or 18,412,751 other basis and					
		sales expenses					
	С	Gain or (loss) -1,271,095					
	d	Net gain or (loss)		-1,271,095			-1,271,095
	8a	Gross income from fundraising					
Other Revenue		events (not including \$					
क >		of contributions reported on line 1c)					
Ě		See Part IV, line 18					
<u>.</u>	<u>.</u>	a					
¥	Ь	Less direct expenses b	avants 🕨	0			
_	c 9a	Net income or (loss) from fundraising	events f				+
		Gross income from gaming activities See Part IV, line 19					
		a					
	ь	Less direct expenses b					
	c	Net income or (loss) from gaming acti	vities	0			
	10a	Gross sales of inventory, less returns and allowances .					
	Ь	Less cost of goods sold b					
	c	Net income or (loss) from sales of inv	entory -	0			
	<u> </u>	Miscellaneous Revenue	Business Code				
	11a	REGISTRATION/ID CARDS	900,099	4,145			4,145
			900,099	4,648			4,648
	b	VENDING MACHINE	900,099	606			606
	c	GOLF TOKENS	900,099	906			606
	d	All other revenue		9,399			
	e	Total. Add lines 11a-11d				(-1,063,633
	12	Total Revenue. Add lines 1h, 2g, 3, 4, 9c, 10c, and 11e	. 5, 6d, 7d, 8c, ►	2,232,908	U		-1,003,033

Part IX Statement of Functional Expenses

	Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).							
			(B), (C), and	(D).	(D)			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses			
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV , line 21 $$	1,290	1,290					
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0						
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0						
4	Benefits paid to or for members	0						
5	Compensation of current officers, directors, trustees, and key employees	149,222	118,654	15,512	15,056			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0						
7	Other salaries and wages	1,011,277	804,126	105,122	102,029			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	32,656	25,923	3,417	3,316			
9	Other employee benefits	153,979	125,609	14,397	13,973			
10	Payroll taxes	96,683	78,528	9,213	8,942			
11	Fees for services (non-employees)				_			
а	Management	0			-			
ь	Legal	94	48	23	23			
С	Accounting	66,697		66,697	-			
d	Lobbying	0		·				
e	Professional fundraising See Part IV, line 17	0			_			
f	Investment management fees	107,462		107,462	_			
g	Other	9,503	3,574	4,532	1,397			
12	Advertising and promotion	4,819			4,819			
13	Office expenses	73,532	57,755	15,370	407			
14	Information technology	50,087	20,968	29,119				
15	Royalties	0						
16	Occupancy	345,743	344,878	865				
17	Travel	45,271	29,567	11,767	3,937			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0						
19	Conferences, conventions, and meetings	3,135	1,499	1,636				
20	Interest	475,531	470,776	4,755				
21	Payments to affiliates	0						
22	Depreciation, depletion, and amortization	866,615	857,949	8,666				
23	Insurance	93,027	92,097	930				
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)							
а	EDUCATION PROGRAM	257,478	257,478					
b	MISCELLANEOUS	8,995	2,507	6,488				
С					_			
d								
e								
f	All other expenses				-			
25	Total functional expenses. Add lines 1 through 24f	3,853,096	3,293,226	405,971	153,899			
26	Joint Costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation		. ,	, =	,			

Da	rt X	Balance Sheet					·	
		Balance Sheet			(A)		(B	
					Beginning of year		End of	•
	1	Cash—non-interest-bearing			852			1,009
	2	Savings and temporary cash investments	•		3,266,005			1,934,644
	3	Pledges and grants receivable, net	•		163,032	3		1,116,920
	4	Accounts receivable, net			1,069	4		278
	5	Receivables from current and former officers, directors, trustees other related parties Complete Part II of Schedule L				5		
	6	Receivables from other disqualified persons (as defined under so persons described in section 4958(c)(3)(B) Complete Part II of				6		
	7	Notes and loans receivable, net				7		
ets	8	Inventories for sale or use				8		
Assets	9	Prepaid expenses and deferred charges			34,616	9		107,411
⋖	10a	Land, buildings, and equipment cost basis	10a	16,218,418				
	b	Less accumulated depreciation Complete Part VI of Schedule D	10b	3,313,007	13,432,007	10c	1:	2,905,411
	11	Investments—publicly traded securities			11,131,702	11		8,372,296
	12 Investments—other securities See Part IV, line 11		8,320,804	12	1:	2,294,369		
	13	Investments—program-related See Part IV, line 11				13		
	14	Intangible assets				14		
	15	Other assets See Part IV, line 11		346,291	15		350.375	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		•	36,696,378	16	3	7,082,713
	17	Accounts payable and accrued expenses .			877,543	17		1,682,290
	18	Grants payable			077,040	18		1,002,200
	19	Deferred revenue		19				
			10,775,000	20	1	0,775,000		
9	20	Tax-exempt bond liabilities	10,775,000			0,775,000		
Ĕĕ	21	Escrow account liability Complete Part IV of Schedule D		•		21		
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
		persons Complete Part II of Schedule L		•		22		
	23	Secured mortgages and notes payable to unrelated third parties	•	•		23		
	24	Unsecured notes and loans payable				24		
	25	Other liabilities Complete Part X of Schedule D	•			25		
	26	Total liabilities. Add lines 17 through 25			11,652,543	26	1:	2,457,290
У		Organizations that follow SFAS 117, check here ▶ and comp through 29, and lines 33 and 34.	lete li	nes 27				
Balance	27	Unrestricted net assets			23,678,706	27	2	3,072,681
<u> </u>	28	Temporarily restricted net assets			1,365,129	28		1,552,742
귤	29	Permanently restricted net assets				29		
r Fund		Organizations that do not follow SFAS 117, check here ► ☐ an lines 30 through 34.	d com	plete				
S Of	30	Capital stock or trust principal, or current funds				30		
sets	31	Paid-in or capital surplus, or land, building or equipment fund				31		
ASS	32	Retained earnings, endowment, accumulated income, or other fu				32		
Net	33	Total net assets or fund balances			25,043,835	33	2	4,625,423
Ž	34	Total liabilities and net assets/fund balances			36,696,378	34		7,082,713
Pa	rt XI				55,555,51	3		.,,002,,
		i manerar otatemento ana Reporting						
1	A c c c	ounting method used to prepare the Form 990	Λοστι	ual C Other			Yes	No
1 2a		the organization's financial statements compiled or reviewed by			ant?	2a		No
za b		the organization's financial statements audited by an independen		•		2b	Yes	110
С		es" to 2a or 2b, does the organization have a committee that assi				20	Yes	
	audıt	, review, or compilation of its financial statements and selection	of an 11	ndependent accou	ntant?	2c	1 65	h
	Singl	result of a federal award, was the organization required to underg e Audit Act and OMB Circular A-133?				3a		N o
b	If "Ye	es," did the organization undergo the required audit or audits? .				3b		

Employer identification number

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization Tiger Woods Learning Center Foundation

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

Open to Public Inspection

								20-	-067781	5	
Pai	rt I	Reason	for Public C	harity Status (to be co	mpleted	by all or	ganızatıo	ns) (See	Instruct	ions)	
The c	rganız	zation is not	a private found	ation because it is (Please	check onl	ly one org	anızatıon))			
1	Γ	A church, c	onvention of ch	nurches, or association of ch	urches de	escribed in	Section 1	L 70(b)(1)((A)(i).		
2	굣	A school de	escribed in Sec l	t ion 170(b)(1)(A)(ii). (Attac	:h Schedu	ıle E)					
3	Γ	A hospital	or a cooperativ	e hospital service organizati	on descril	bed in Sec	t ion 170(t	o)(1)(A)(i	ii). (Attac	h Schedul	le H)
4	Γ	A medical i	research organi	zation operated in conjunction	on with a l	hospital d	escribed ii	n Section :	170(b)(1)	(A)(iii). E	nter the
		hospital's r	name, city, and	state							
5	Γ	An organiza	atıon operated 1	or the benefit of a college or	universit	y owned o	r operated	by a gove	rnmental	unıt desci	rıbed ın
		Section 170	0(b)(1)(A)(iv).	(Complete Part II)							
6	Γ	A federal, s	state, or local g	overnment or governmental	unıt descr	ıbed ın Se	ct ion 170	(b)(1)(A)	(v).		
7	Γ	An organiza	ation that norm	ally receives a substantial p	art of its s	support fro	m a gove	rnmental u	ınıt or fron	n the gene	ral public
		described i	n Section 170(I	o)(1)(A)(vi) (Complete Par	tII)						
8	Γ	A communi	ıty trust descrıt	oed in Section 170(b)(1)(A)	(vi) (Com	nplete Par	tII)				
9		An organiza	ation that norm	ally receives (1) more than	331/3% o	fits supp	ort from co	ontribution	ıs, membe	rship fees	, and gross
		receipts fro	om activities re	lated to its exempt functions	—subject	to certair	n exceptio	ns, and (2) no more	than 331/	'3% of
		ıts support	from gross inve	estment income and unrelate	ed busines	ss taxable	ıncome (l	ess sectio	on 511 tax	k) from bu	sınesses
		acquired by	y the organizati	on after June 30, 1975 See	Section 5	09(a)(2).	(Complete	e Part III)		
10	\sqcap	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See Se	ct ion 509((a)(4). (Se	ee instruct	tions)
11	_	one or more the box tha a T	e publicly suppo it describes the ype I b		d in section tion and c Type III	on 509(a) omplete li - Function	(1) or sec nes 11e t nally Integ	tion 509(a hrough 11 grated	a)(2) See h d	Section 5	09(a)(3). Check
е	Γ		foundation man	rtify that the organization is agers and other than one or			-				•
f		_		d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r Type III	supportin	ng organization,
g		check this		as the organization accepted	d any dift i	or contrib	ution from	any of the			ı
9		following pe		as the organization accepted	a any gne	or continu	40111110111	any or the			
		(i) a perso	n who directly o	r indirectly controls, either a	alone or to	gether wi	th persons	describe	d ın (ıı)		Yes No
		and (III) bel	low, the govern	ng body of the the supported	d organiza	tion?				11g	(i) No
		(ii) a famıly	y member of a p	erson described in (i) above	?					11g(ii) No
		(iii) a 35%	controlled enti	ty of a person described in (ı) or (11) al	bove?				11g(iii) No
h		Provide the	following infor	mation about the organizatio	ns the org	janization	supports				
	/:> N:		/::> FTN	/:::> T f	/: \ T		(> D!		((::> A
		ame of orted	(ii) EIN	(iii) Type of organization (described on lines 1-9		s the ation in		ou notify nization		s the ation in	(vii) A mount of support?
		ıızatıon		above or IRC section	col (i)) of your	col (i) o		
				(See Instructions))	your go docur		supp		ın the	ŪS?	
					Yes	No	Yes	No	Yes	No	

Total

Part II	Support Schedule for Organizations Described in IRC 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.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(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 The value of services or facilities					 		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts 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							
10	from the sale of capital assets (Explain in							
	Part IV)							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns)		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and stop here		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	▶ □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and stop here. The organization qualifies a				,			▶ □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				▶ □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							► □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	Private Foundation. If the organization did	not check the b	oux on line 13, 1	oa, 160, 1/a or	1/D, check this	oox an	u see	▶ □
	ınstructions							F-1

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	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 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts 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 30 June, 1975		+				
С	Add lines 10a and 10b						
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 IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
				-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. 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 **33 1/3% Tests - 2007.** 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

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

▶□

Part IV	Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)
	Facts and Circumstances Test

Schedule A (Form 990 or 990-EZ) 2008

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Employer identification number Name of the organization Tiger Woods Learning Center Foundation 20-0677815 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ☐ Yes ☐ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a Total number of conservation easements 2b b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) 2d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?

- Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 🕨
- 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items
- Revenues included in Form 990, Part VIII, line 1

▶ \$

Assets included in Form 990, Part X

For Paperwork Reduction Act Notice, see the Intructions for Form 990 Cat No 52283D ☐ Yes

Par	Organizations Maintaining Co	llections of Art	, His	<u>tori</u>	<u>cal Tre</u>	easu	res, or O	the	<u>r Similar <i>A</i></u>	sse	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	e foll	owing th	nat ar	e a significa	ant u	se of its colle	ction	I	
а	Public exhibition		d	\sqcap	Loan o	rexcl	hange progr	ams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	ın hov	v they	further	the c	organization	ı's ex	empt purpos	e in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								ılar	Γ,	Yes	Г No
Pa	Trust, Escrow and Custodial A Part IV, line 9, or reported an an						nızatıon a	nsw	ered "Yes"	to Fo	rm 99	90,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	diary	for c	ontributi	ions d	or other ass	ets i	not	Γ.	Yes	Г No
b	If "Yes," explain why in Part XIV and comple	ete the following tab	le				_					
									-	mou	nt	
С	Beginning balance						L	1c				
d	Additions during the year							1 d				
е	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?							Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/										
Pa	rt V Endowment Funds. Complete							_				
		(a)Current Year	(b)	Prior Y	'ear	(c) Tw	o Years Back	(d)	Three Years Bac	(e)	Four Ye	ears Back
1a	Beginning of year balance											
b	Contributions											
С	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held a						<u> </u>				
а	Board designated or quasi-endowment											
ь	Permanent endowment											
	Term endowment											
c 3a	Are there endowment funds not in the posses	ssion of the organiz	ation t	hat a	re held	and a	dministered	d for	the			
_	organization by	ooron or the organiza				uu					Yes	No
	(i) unrelated organizations								3	a(i)		
	(ii) related organizations								3	a(ii)		
b	If "Yes" to 3a(11), are the related organization	•						•		3b		
4	Describe in Part XIV the intended uses of th					_						
Pa	t VI Investments—Land, Buildings	s, and Equipme	nt. S	<u>ee F</u>	orm 99	0, Pa	art X, line	10.		<u> </u>		
	Description of investment				Cost or of		(b) Cost or of basis (othe		(c) Depreciati	on	(d) Boo	ok value
1a	Land		•									
b	Buildings					0	11,551	,230	1,072,	189	10	0,478,741
С	Leasehold improvements									\perp		
d	Equipment		•			0	1,548	3,130	1,174,	536		373,594
е	Other	<u> </u>				0	3,119	,058	1,065,	982		2,053,076

Part VIII Investments—Other Securities. Se	ee Form 990, Part X, line 1		
(a) Description of security or category (including name of security)	(b)Book value		d of valuation · year market value
Financial derivatives and other financial products		Cost of end-of-	year market value
Closely-held equity interests			
Other			
ALTERNATIVE INVESTMENTS	12,294,369		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	12,294,369		
Part VIII Investments—Program Related.		13.	
(a) Description of investment type	(b) Book value	(c) Metho	d of valuation
(a) Description of investment type	(b) book value	Cost or end-of-	year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	F		
Part IX Other Assets. See Form 990, Part X,			
(a) Desc	cription		(b) Book value
LOAN ORIGINATION COSTS, NET			306,112
DUE FROM AFFILIATES			0
DEPOSIT - SIGNAGE			43,950
ACCRUED INT & DIVIDEND REC			313
Total. (Column (b) should equal Form 990, Part X, col.(B) lir	ne 15.)		
Part X Other Liabilities. See Form 990, Par			
(a) Description of Liability	(b) A mount		
Federal Income Taxes			
See Additional Data Table			
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	F		

Par	XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,232,908
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,853,096
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,620,188
4	Net unrealized gains (losses) on investments	4	2,002,484
5	Donated services and use of facilities	5	-
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-800,729
9	Total adjustments (net) Add lines 4 - 8	9	1,201,755
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-418,433
	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		· · · · · · · · · · · · · · · · · · ·
1	Total revenue, gains, and other support per audited financial statements	1	3,425,265
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		, ,
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	1,201,755
3	Subtract line 2e from line 1	3	2,223,510
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	9,398
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	2,232,908
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Reti	urn
1	Total expenses and losses per audited financial statements	1	3,843,698
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
Ь	Prior year adjustments		
c	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	3,843,698
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
	Other (Describe in Part XIV)		_
Ь		_ !	
ь с 5	Add lines 4a and 4b	4c 5	9,398 3,853,096

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
RECONCILIATION OF CHANGE IN NET ASSETS		(\$800,729) REPRESENTS UNREALIZED LOSS ON INTEREST RATE SWAP
REVENUE INCLUDED ON AUDITED FINANCIAL STATEMENTS NOT ON RETURN	· · · · · · · · · · · · · · · · · · ·	(\$800,729) REPRESENTS UNREALIZED LOSS ON INTEREST RATE SWAP
REVENUE INCLUDED ON FORM 990, NOT ON AUDITED FINANCIAL STATEMENTS	,	\$9,398 REPRESENTS MISCELLANEOUS INCOME REPORTED ON FINANCIAL STATEMENTS AS A REDUCTION TO MISCELLANEOUS EXPENSE
EXPENSES INCLUDED ON FORM 990, NOT ON AUDITED FINANCIAL STATEMENTS	, , , , , , , , , , , , , , , , , , , ,	\$9,398 REPRESENTS MISCELLANEOUS INCOME REPORTED ON FINANCIAL STATEMENTS AS A REDUCTION TO MISCELLANEOUS EXPENSE

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

Schools

Name of the organization

Employer identification number

Tiger Woods Learning Center Foundation 20-0677815 YES NO 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain Yes THE TIGER WOODS LEARNING CENTER FOUNDATION PUBLICIZED ITS RACIALLY NONDISCRIMINATORY POLICY IN ALL STUDENT APPLICATION FORMS AND THE ORGANIZATION'S WEBSITE 4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo 5h h Other extracurricular activities? Νo If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) 6a Does the organization receive any financial aid or assistance from a governmental agency? Νo 6a **h** Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either 6a or b, please explain using an attached statement 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," attach an explanation

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2008

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Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Name of the organization

Tiger Woods Learning Center Foundation

Employer identification number

20-0677815

Pai	rt I Questions Regarding Compensation	on				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part II		ny of the following to or for a person listed in Form vide any relevant information regarding these items			
	First class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a v provision of all the expenses described above? If "	•		1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2		
3	Indicate which, if any, of the following the organization's CEO/Executive Director Check all f					
	Compensation committee		Written employment contract			
	✓ Independent compensation consultant	<u> </u>	, ,			
	Form 990 of other organizations	<u> - </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990	, Part VI	I, Section A, line 1a			
а	Receive a severance payment or change of control	paymen	t?	4a		Νo
b	Participate in, or receive payment from, a supplement	ental nor	nqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-	based co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must c	omplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a	, did the organization pay or accrue any			
а	The organization?			5a	ı	Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III	•	·	8		No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name			W-2 and/or 1099-MIS		(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	reported in prior Form	
		(i) Base compensation	incentive compensation	(iii) Other compensation		Benente	(5)(1) (5)	990 or Form 990-EZ	
GREGORY T MCLAUGHLIN	(I) (II)	0 328,800	0	0	0	_	0	0	
	(ii)	320,000	120,000	20,769	6,019	33,370	508,958	388,269	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
(((ii)								

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Ret urn Ref erence	Explanat ion
Compensation from Related Organizations		The president, secretary and CEO, Gregory T McLaughlin, is compensated through two related 501(c)(3) organizations - Tiger Woods Foundation and Tiger Woods Charity Event Corporation - however, in addition to his responsibilities for these two organizations, he also serves as the president, secretary, and CEO of Tiger Woods Learning Center Foundation and Tiger Woods Learning Center Foundation - D C , both 501(c)(3) affiliates Mr McLaughlin's total compensation for his services provided to all four 501(c)(3) affiliated public charities was paid as follows (B)(i) (B)(ii) (B)(iii) (C) (D) Tiger Woods Foundation 105,000 2,600 Tiger Woods Charity Event Corporation 223,800 120,000 20,769 3,419 33,370

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DLN: 93493230004100

OMB No 1545-0047

Supplemental Information on Tax Exempt Bonds

Department of the Treasury Internal Revenue Service Name of the organization

Schedule K

(Form 990)

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O.

Open to Public **Inspection** Employer identification number

Tiger Woods Learning Center Foundation									20-0677815					
D.	art I Bond Issues (Required	for 2008)								20-06//8	012			
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issu	e Price	(f) Des	(f) Description of Purpose		(g) Defeased		Beh	On alf of suer
											Yes	No	Yes	No
A	CA STATEWIDE COMMUNITIES DEVELOPMENT AUTHORITY	68-0164610	1309114R8	08-10-2006 10,775,000 BUILD TIGER WOODS LEARNING CENTER			х		x					
Pa	rt II Proceeds (Optional for .	2008)			•									
1	Total Proceeds of Issue				Α	<u> </u>	8			D			E	
2	Gross Proceeds in Reserve Funds													
3	Proceeds in Refunding or Defeasar	nce Escrows												
4	Other Unspent Proceeds													
5	Issuance Costs from Proceeds													
6	Working Capital Expenditures from	Proceeds												
7	Capital Expenditures from Proceed	ls												
8	Year of Substantial Completion													
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	s	No
9	Were the bonds issued as part of a	current refunding iss	ue?		Х									
10	Were the bonds issued as part of a	n advance refunding	ıssue?		×									
11	Has the final allocation of proceed:	s been made?			Х									
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?				х									
Pa	rt IIII Private Business Use	(Optional for 2008))	1		1				Γ				
				/	-	-	B No		D No.	D Vaa	N-	V-	E	N-
1	Was the organization a partner in a which owned property financed by t		mber of an LLC,	Yes	No X	Yes	No	Yes	No	Yes	No	Yes		No
2					х									
For	Paperwork Reduction Act Notice, see the	Instructions for Form	990.			Cat No 501	193E			Sch	edule K	(Form 99	0) 2008	į.

Schedule K (Form 990) 2008

Part III Private Business Use (Continued)

		Α		В		С		D			E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		х								
3b	Are there any research agreements with respect to the financed property which may result in private business use?		Х								
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		x								
Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government											
Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government											
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?		х								
Pai	t IV Arbitrage (Optional for 2008)					_					
			<u> </u>	E	3		c	ı	<u> </u>		Ę
)	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?		Х								
2	Is the bond issue a variable rate issue?		X								
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?		х								
b	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?		Х								
b	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		Х								
6	Did the bond issue qualify for an exception to rebate?		Х		1						

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DLN: 93493230004100

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Non-Cash Contributions

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Department of the Treasury Internal Revenue Service

Name of the organization Tiger Woods Learning Center Foundation **Employer identification number** 20-0677815 Part I Types of Property

		(a) Check	(b) Number of Contributions	(c) Revenues reported on	(d Method of d	•	na	
		ıf	Trainbut of Continbutions	Form 990, Part VIII, line	reven		9	
	Art—Works of art	applicable		1 g				
	Art—Historical treasures							
	Books and publications Clothing and household							
,	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .							
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Q ualified conservation contribution (historic structures)							
14	Qualified conservation contribution (other)							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
	GOLF		_		EMA			
	Other (describe <u>EQUIPMENT</u>)	X	1	60,000				
	Other (describe <u>SUPPLIES</u>)	X	1	9,300	F M V			
	Other (describe)							
	Other (describe)							
29	Number of Forms 8283 received which the organization complete Acknowledgement	d Form 828	3, Part IV, Donee	ar for contributions for	29			0
						Ιv	es	No
30a	During the year, did the organization hold for at	ition receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it must			
	least three years from the date o	of the initial	contribution, and which is	not required to be used for	exempt purposes			
	for the entire holding period? .					30a		No
b	If "Yes", describe the arrangeme	ent in Part I	I					
31	Does the organization have a gif	tacceptand	ce policy that requires the r	review of any non-standard	contributions?	31		No
32a	Does the organization hire or us contributions?	e third parti		to solicit, process, or sell	non-cash	32a		Νο
b	If "Yes", describe in Part II							
33	If the organization did not report	revenuesı	n Column (c) for a type of p	roperty for which Column (a	a) is			
	checked, describe in Part II						_	
For P	aperwork Reduction Act Notice, see	the Instruct	tions for Form 990.	Cat No 51227J	Schedule	M (Form	990)	2008

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.								
Identifier	ReturnReference	Explanation						
240111111	Notal III Colored	Explanation						
	1	1						

DLN: 93493230004100

20-0677815

SCHEDULE 0 (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

Inspection

Employer identification number Tiger Woods Learning Center Foundation

ldentifier	Return Reference	Explanation
MEMBERS OF THE ORGANIZATION	FORM 990, PART VI, LINE 7A	THE ORGANIZATION HAS ONE MEMBER THE MEMBER'S CLASS IS NONVOTING THE MEMBER ELECTS AND DESIGNATES THE BOARD OF DIRECTORS ALL CORPORATE POWERS ARE

ldentifier	Return Reference	Explanation
PROCESS FOR REVIEW OF FORM 990	FORM 990, PART VI, LINE 10	The Board of Directors has delegated the review of the Form 990 to the Audit Committee. The organization's Executive Staff works closely with the outside accounting firm it engages to review the return, and the final draft of Form 990 is also reviewed by the CFO prior to providing the draft to the Audit Committee. In addition to consulting with the CFO and Executive Staff, the Audit Committee also meets with the accounting firm hired to prepare the Form 990. Subsequent to its review, the Audit Committee reports back to the Board regarding its oversight of the Form 990 and the final draft is provided to the entire voting Board before the return is filed.

Identifier	Return Reference	Explanation
CONFLICT OF INTEREST POLICY	FORM 990, PART VI, LINE 12C	Pursuant to the Conflicts of Interest Policy, an annual conflict of interest questionnaire, aimed at determining any family and business relationships and transactions or other transactions that may pose a potential conflict, is distributed to all covered persons (i.e., board members, officers and executive leadership or key employees). Covered persons are required to disclose real or potential conflicts at the time when such conflicts arise. When someone becomes a covered person and annually thereafter, each covered person is required to sign a statement affirming that he/she. (1) has received a copy of the Conflicts or Interest Policy, (2) has read the Policy and understands said Policy, and (3) agrees to comply with all requirements of the Policy, including completing the conflicts of interest questionnaire. The procedures for addressing any conflict of interest includes, but is not limited to, the following. (1) the conflicting interest is fully disclosed to the Board, (2) the interested person responds to factual questions related to the substance of the transaction or arrangement being considered, after which he/she shall leave the meeting, (3) the person with the conflict of interest is excluded from the discussion and approval of such transaction, (4) alternatives to the proposed transaction are investigated, competitive bids or comparable valuations are obtained, (5) any conflicting issues during the course of a Board meeting which cannot be resolved is referred to the Governance Committee, and (6) the transaction or action must be approved by a majority of disinterested persons

ldentifier	Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	FORM 990, PART VI, LINE 15	The Organization has the following policies and procedures to determine the compensation of officers and key employees. The Board appoints a Human Resources Committee, comprised solely of independent directors, none of which have a conflict of interest with respect to the compensation arrangement, to be accountable for setting reasonable compensation packages for each officer or key employee (including the CEO). The Human Resources Committee develops, consistent with the organization's philosophy and principles, the annual performance goals and criteria to be used in determining merit increases and variable compensation criteria for officers and key employees. The Human Resources Committee also hires a qualified independent compensation and benefits specialist (independent expert) to review, analyze and provide benchmarking data for the total compensation and benefits packages of officers and key employees. Appropriate comparability data is obtained from the independent experts, i.e., total economic benefits paid by similarly situated organizations (both taxable and tax-exempt) for similar job responsibilities. The Committee's written records include the (1) terms of the arrangement with the disqualified person (including the date the arrangement was approved), and (2) a description of the comparable data relied on by the Committee Key deliberations of the Committee, including (A). The terms of the transaction that was approved and those who voted on it, (C). The comparability data obtained and relied upon by the authorized body and how the data was obtained, and (D). Any actions taken with respect to consideration of the transaction by anyone who is otherwise a member of the authorized body but who had a conflict of interest with respect to the transaction are also documented in minutes which are approved at the next.

ldentifier	Return Reference	Explanation
DOCUMENTS AVAILABLE TO THE PUBLIC	FORM 990, PART VI, LINE 19	While federal tax laws do not mandate that the organization's governing documents, conflict of interest policy and financial statements be made available for public inspection, the organization makes its audited financial statements that were prepared in accordance with generally accepted accounting principles (GAAP) available upon request

ldentifier	Return Reference	Explanation
Average Hours Per Week Devoted to Related Organizations	Form 990, Part VII, Section A, Column B	Gregory McLaughlin devotes an average of 25 hours per week to Tiger Woods Foundation and 40 hours per week to Tiger Woods Charity Event Corporation Jin Thatcher devotes an average of 40 hours per week to Tiger Woods Foundation Lindsay Feiler devotes an average of 40 hours per week to Tiger Woods Charity Event Corporation

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

DLN: 93493230004100

2008

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2008

Related Organizations and Unrelated Partnerships

Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE R

▶ Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

Name of the organization Tiger Woods Learning Center Foundation				Employer identification number				
				20-0677815				
Part I Identification of Disregarded Entities					,			
(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income E	(E) nd-of-year assets	(F) Direct controlling entity			
Part II Identification of Related Tax-Exempt Organizat	ions							
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity state (if section 501(c)	(F) atus Direct controlling (3)) entity			
TIGER WOODS FOUNDATION INC								
121 INNOVATION DR SUITE 150 IRVINE, CA92617 06-1468499	Youth Program	СА	501(C)(3)	7				
TIGER WOODS CHARITY EVENT CORPORATION 121 INNOVATION DR SUITE 150 IRVINE, CA92617 06-1554474	Fundraising	CA	501(C)(3)	11				
TIGER WOODS LEARNING CENTER FND DC								
121 INNOVATION DR SUITE 150 IRVINE, CA92617 26-1175108	Education	DC	501(C)(3)	2				

Cat No 50135Y

(A) Name, address, and EIN of related organization	Prim	(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	incom inve	(E) ominant e(related, estment, related)	Share	(F) e of total income	(G) Share of end-of- year assets	(H Disprop allocat	l) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organ		(B) Primary activity		Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

(6)

Part V	Transactions w	ith Related	Organizations

Pa	rt V Transactions with Related Organizations							
	Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No		
1 D	uring the tax year, did the orgranization engage in any of the following transaction:	s with one or more related organizations listed in Parts II-	·IV?					
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled enti	ıty		1a		No		
Ь	Gift, grant, or capital contribution to other organization(s)							
c	Gift, grant, or capital contribution from other organization(s)			1c	Yes			
d	Loans or loan guarantees to or for other organization(s)			1d		No		
e	Loans or loan guarantees by other organization(s)			1e		No		
f	Sale of assets to other organization(s)			1f		No		
g	Purchase of assets from other organization(s)			1g		No		
h	Exchange of assets			1h		No		
i	Lease of facilities, equipment, or other assets to other organization(s)			1i		No		
j	Lease of facilities, equipment, or other assets from other organization(s)			1j		No		
k	Performance of services or membership or fundraising solicitations for other orga	anization(s)		1k		No		
ı	Performance of services or membership or fundraising solicitations by other organization(s)							
m	m Sharing of facilities, equipment, mailing lists, or other assets							
n	Sharing of paid employees			1n	Yes			
0	Reimbursement paid to other organization for expenses			10	Yes			
р	Reimbursement paid by other organization for expenses			1 p	Yes			
q	O ther transfer of cash or property to other organization(s)			1q		No		
r	O ther transfer of cash or property from other organization(s)			1r		No		
2	If the answer to any of the above is "Yes," see the instructions for information on	n who must complete this line, including covered relations	hips and transaction thresholds					
	(A)	_ (B)	(C)					
	Name of other organization(s)	Transaction type(a-r)	Amount Involved					
(1)								
(2)								
(3)								
(4)								
(5)		1						

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

									_											
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		(E) Share of end-of-year assets			(G) Code V—UBI amount on Box 20 of K-1	(H) General o managing partner?)
			Yes	No		Yes	No		Yes	No										
			•	•		•		Sabadula	D / Form											