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Form **990**

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

2009

Open to Public Inspection

A Fo	r the .	2009 са	lendar yea	r, or tax year beginning	01-01-2009 and ending 12-31-200	9				
_		pplicable	Please	C Name of organization WORLD GOLF FOUNDATION	DN INC			identification number		
	iress ch	_	use IRS label or	Doing Business As			59-2998925 E Telephone number			
_	me cha	_	print or type. See				(904) 94(
	ial retu		Specific Instruc-	Number and street (or P ONE WORLD GOLF PLACE	O box if mail is not delivered to street addre	ess) Room/suite	: ' '	ots \$ 37,909,154		
	mınate		tions.							
_	ended			City or town, state or cou ST AUGUSTINE, FL 3209						
App	olication	pending		,						
				ne and address of princ EN FMONA	ıpal officer		nis a group ret			
			ONEW	ORLD GOLF PLACE		аппп	ates?	⊤Yes √ No		
			STAU	GUSTINE,FL 32092			all affiliates incl			
 т Та	x-exem	npt status	✓ 501(c)	(3) ◄ (insert no)	947(a)(1) or	_	lo," attach a li up exemption	st (see instructions)		
				THEFIRSTTEE ORG		H(c) Gro	up exemption	number F		
						1		Π		
		ganization Sum		ion Trust Association	Other 🕨	L Year of f	ormation 1989	M State of legal domicile FL		
Ра				e organization's missio	n or most significant activities					
	-	TO DE	ELOP AN	D SUPPORT INITIATI	VES INCLUDING THE HALL OF FA		•	GOLF 20/20 THAT		
<u>ಲ</u>		POSIT:	VELY IMP	ACT LIVES THROUGH	THE GAME OF GOLF AND ITS TRA	ADITIONAL	VALUES			
Governance										
ie Fe										
ŝ	2	Check	:his box 🟲	f the organization dis	continued its operations or disposed	of more thar	125% of its ne			
26	3	Number	of voting r	nembers of the governı	ng body (Part VI, line 1a)		•	3		
ĭies	4	Numbe	ofindepen	dent voting members o	f the governing body (Part VI, line 1	b)	•	4		
Activities				nployees (Part V , line 2				5137		
Ą				•	ecessary)			6 200		
		_			rom Part VIII, column (C), line 12			7a 690,155		
	Ь	Net unr	elated busi	ness taxable income fr	om Form 990-T, line 34	D.:	V	7b -267,889		
ā		Contri	hutians and	d grants (Part VIII line	1.6)	Pri	or Year			
	8				:1h)		31,362,698 2,392,313			
Ravenu	10				2 2 g)		-410,695			
歪	11				nes 5, 6d, 8c, 9c, 10c, and 11e)		2,374,320	'		
	12				must equal Part VIII, column (A), lin	e	2/57 1/525	2,22.,5		
		12) .			<u> </u>		35,718,636	<u> </u>		
	13			·	K, column (A), lines 1-3)		3,111,290	3,221,273		
	14		•		, column (A), line 4)		0	0		
88	15	Saları 10)	es, other co	empensation, employee	benefits (Part IX, column (A), lines	5 –	10,152,163	9,580,021		
Expenses	16a	,	sional fund	raising fees (Part IX, c	olumn (A), line 11e)		39,186			
<u>₹</u>	ь	Total fu	ndraising exp	enses (Part IX, column (D),	line 25) ▶ 863,658					
ш	17				es 11a-11d, 11f-24f)		20,749,427	24,131,123		
	18	Total	expenses A	Add lines 13–17 (must	equal Part IX, column (A), line 25)		34,052,066			
	19	Reven	ue less exp	enses Subtract line 18	3 from line 12		1,666,570	222,153		
88						_	ng of Current	End of Year		
Not Assets or Fund Balances	20	Total	ecete /De-	t V line 16\			Year 50,552,830	47,470,629		
A B	21			Part X, line 26)		51,806,103	-			
2 E	22				ne 21 from line 20		-1,253,273	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' 		
			ature Blo		10 21 110111 11110 20 1 1 1 1 1 1		1,233,273	1,200,717		
		Under p	enalties of pe	rjury, I declare that I have e	examined this return, including accompanying					
		and bel	ef, it is true, o	correct, and complete Decla	ration of preparer (other than officer) is base	ed on all informa	ition of which prej	parer has any knowledge		
Sign	1	<u> </u>				2010)-11-12			
Here		Sign	ature of office	er		Date				
		STE	PHEN F MONA	CHIEF EXEC OFFICER						
			or print nam							
		Preparer				Check If		ntifying number		
Paid		signatur				self- empolyed 🕨 🦵	(see instruction	ons)		
•	arer's		ame (or yours	PRICEWATERHOUSECO	,	ETAL A				
Use (Only		nployed), and ZIP + 4	50 N LAURA STREET	ETIN L	EIN Þ				
		<u> </u>		JACKSONVILLE, FL 322	202		Phone no 🕨	(904) 354-0671		
Mav	the IR	s discus	s this retu		own above? (see instructions)					

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

TO DEVELOP AND SUPPORT INITIATIVES INCLUDING THE HALL OF FAME, THE FIRST TEE, AND GOLF 20/20 THAT POSITIVELY IMPACT LIVES THROUGH THE GAME OF GOLF AND ITS TRADITIONAL VALUES

2	Did the organization undertake any significant program services during the year which were not listed the prior Form 990 or 990-EZ?	ed on . Yes V No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	n
	If "Yes," describe these changes on Schedule O	
4	Describe the exempt purpose achievements for each of the organization's three largest program ser Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to reportallocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ 32,153,411 including grants of \$ 3,221,273) (Re	evenue \$ 4,280,115)
	World Golf Foundation, Inc. (the "Foundation"), which is supported by major international golf organizations and profess Fame, The First Tee, GOLF 20/120 and other nonprofit components. The Foundation has dual mission. The first is to he of its greatest individuals (both players and contributors to the game) and to create entertaining and educational exhibit Secondly, the Foundation has undertaken several charatable initiatives including. The First Tee and GOLF 20/20, as well a elements of the Foundation work together to promote growth of the game of golf among adults, youth and minorities a Foundation is supported by major golf organizations and professional tours throughout the world including. American Juri Course Architects Association Tour Gournament Association Club 1 Builders Association of America Golf Course Superintendents Association of America Golf Writers Association of America Golf Tour Organization Lades Professional Golf Association LPGA Tournament Ownson National Golf Course Superintendents Association of America Golf Writers Association National Golf Course Superintendents Association Organization Lades Professional Golf Association World Golf Hall of Fame ("W6HOP") opened its muss providing visitors an opportunity to learn about the rich history, values and deeply rooted traditions of the game through World Golf Hall of Fame is housed in the Museum. The World Golf Hall of Fame IMAX Theater provides educational oppogeneral public. The WGHOP memorial propers of the provides with the latest interactive technology. The artifacts on display are representative of the history of golf and man Foundation from various individuals and golf organizations for use in the Museum. The WGMOP enshrines the greatest pl Three induction avenues have been created to honor any amateur or other individual deserving of recognition through avenue is the Veterion So has been created to honor any amateur or other individual deserving of recognition through avenue is the Veterion So has been created to honor any amateur	nor the history of golf and the achievements is for the enjoyment of the general public is diversity and anti-doping initiatives. These is well as in the golf industry. The mor Golf Association American Society of Golf Managers Association of America Golf Course iternational Association of Golf Administrators urse. Owners Association National Golf peam Tour The R&A Royal Canadian Golf peam facility ("Museum") in May 1998 a exhibitry and the Walk of Champions. The ritunities to area school children and the 0 separate exhibits that combine historical y of the artifacts are on loan to the ayers and contributors to the game of golf and an International Ballot. A Lifetime his or her contribution to the game. Another is prior to the date of induction into the Hall youth development activity entitled. The tatus, and makes golf physically accessible, oduce the game to students and the pate in the game. The First Tee is designed cations target young people up to the age of a First Tee has developed a National tonships as well as the development of a call education curriculum. The First Tee is and promoting quality and consistency in a call education curriculum. The First Tee is and promoting quality and consistency in a call education curriculum the first Tee is and promoting quality and consistency in a call education curriculum than the properties of the introduced to its positive values. The mission is on accelerating growth over the next. It access goals, by identifying the initiatives it that its dedicated to preserving the history and
4b	(Code) (Expenses \$ including grants of \$) (Rev	enue \$
4c	(Code) (Expenses \$ including grants of \$) (Reve	enue \$)
	Other management (D. 1997)	
4d	Other program services (Describe in Schedule O) (Expanses 4) (Poyonus 4)	V
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ★ 32 153 411)

Part IV	Checklist of	Required	Schedules

	•		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	Yes	
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 similar funds or 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? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 💆	8	Yes	
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, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		No
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
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 U S? 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 U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	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 line 25	24a		No
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		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		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
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	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
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	Yes	
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
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Form 990 ((2009)		Page 5
Part V	Statements Regarding Other IRS Filings and Tax Compliance		
		Yes	No

			Yes	No
a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	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	
	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	
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
•	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
	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	Yes	
Ь	If "Yes," enter the name of the foreign country •KS			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
:	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
1	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
,	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
ı	If "Yes," indicate the number of Forms 8282 filed during the year			
•	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N c
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
, 1	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	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 facilities			
	Section 501(c)(12) organizations. Enter			
3	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
		12-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the	12a		
Ø	If "Yes," enter the amount of tax-exempt interest received or accrued during the vear			

ST AUGUSTINE, FL 32092

(904) 940-4000

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	processes, or changes in Schedule O. See instructions.			
<u> </u>	ection A. Governing Body and Management		V	N
			Yes	No
1a	Enter the number of voting members of the governing body 1a 7			
b	Enter the number of voting members that are independent 1b 7			
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		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
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?	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	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal			
ке	evenue Code.)		Yes	N.
10-	Does the organization have local chapters, branches, or affiliates?	10a	res	No No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	104		NO
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	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		Νo
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	
	If "Yes" to line a or b, 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	100		140
	organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►AL, AK, AZ, AR, CA, CO, CT, DC, F KY, LA, ME, MD, MA, MI, MN, MS, N NY, NC, ND, OH, OK, OR, PA, RI, S WA, WV, WI	1V , N	H,NJ,	NΜ,
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.			
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 DIANE TETSWORTH ONE WORLD GOLF PLACE	ie orga	nızatıor	.

Part VIII 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 Report compensation for the calendar year ending with or within the organization's tax year. 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 all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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 organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Highest compensated employee Key employee Officer Institutional Trustee or director		Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
See add'l data										

Forr	n 990 (2009)			Page 8
1b	Total	0	:	1,005,407
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶21			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	3	Yes	
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	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	Yes	
S	ection B. Independent Contractors			
1	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	\dashv	(C Comper	
		$\frac{1}{1}$		
_		#		
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►0			

Form **990** (2009)

Part VIII Statement of Revenue

Party		Statement	от кечепие		(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 camp	paigns 1a					
Contributions, gifts, grants and other similar amounts	ь	Membership du	es 1b					
	c	Fundraising eve	ents 1c	30,938				
	d	Related organiz	rations 1d					
% E	d Related organizations 1d e Government grants (contributions) 1e			3,318,004				
등 등	f		ons, gifts, grants, and 1f	29,394,926				
but the	g	similar amounts no	ot included above butions included in					
달음		lines 1a-1f \$	3,130,512					
್ ಕ	h	Total. Add lines	s 1a-1f	▶	32,743,868			
				Business Code				
JE .	2a	IMAX THEATER		713,990	991,712	435,110	556,602	
₽	ь	WORLD GOLF HALL	OF FAME	713,990	802,375	802,375		
96	c	THE FIRST TEE	_	713,990	478,753	478,753		
7. M	d	-			· · · · · · · · · · · · · · · · · · ·	·		
ž,	e							
Program Serwce Revenue	f	All other progra	am service revenue					
<u>~</u>	g	Total. Add lines	s 2a-2f		2,272,840			
	3		ome (including dividen					==
			ar amounts)	-	56,582	0	1,471	55,111
	4		stment of tax-exempt bond	· · · · · · · · · · · · · · · · · · ·	1,698,348			1,698,348
	5	Royalties	() Park		1,030,340			1,090,340
	6a	Gross Rents	(ı) Real 88,749	(II) Personal 10,847				
	ь	Less rental	102,397	30,669				
	c	expenses Rental income	-13,648	-19,822				
		or (loss)	·		22.474		FF 37F	24 004
	d	Net rental incor	me or (loss)		-33,471		-55,275	21,804
	7a	Gross amount from sales of assets other	(I) Securities 311,036	(II) O ther				
	ь	than inventory Less cost or other basis and sales expenses	309,767	952				
	c	Gain or (loss)	1,269	-952				
	d	Net gaın or (los	s)	►	317			317
enne	8a	Ψ	_					
Other Revenue		See Part IV , lin	ne 18 a	12,116				
Ě	b		penses b	31,354	40.330			10.330
J	c 9a		(loss) from fundraising	events F	-19,238			-19,238
	94	See Part IV, lin	rom gaming activities ie 19 a					
	b		penses b		0			
	10a	Gross sales of		vities	0			
		returns and allo	a a	592,323				
	ь		oods sold b	233,031	250 202	1 114	107 257	170 922
	С	Net income or (Miscellaneous	(loss) from sales of inve	Business Code	359,293	1,114	187,357	170,822
	11a			900,099	120,456	120,456		
		MISCELLANEO		900,099	1,989	123,130		1,989
	Ь	SPONSORSHIP	P FULLFILLMENT_	300,039	1,509			1,505
	l q	All other raves						
	d e	Total. Add lines	ue s 11a-11d		433.445			
		Tabel ::	Can Instruct	▶ .	122,445			
	12	lotal revenue. 9	See Instructions .	•	37,200,984	1,837,808	690,155	1,929,153 Form 990 (2009)

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

Δ	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D)					
Do no	ot include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	d on lines 6b, (A) (B) (C) Program service Management				(A) (B) (C) Program service Management as			(D) Fundraising expenses
1	Grants and other assistance to governments and organizations		·		·				
	in the U.S. See Part IV, line 21	3,065,773	3,065,773						
2	Grants and other assistance to individuals in the								
	U S See Part IV, line 22	155,500	155,500						
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	3,316,213	2,321,349	829,053	165,811				
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	4,723,520	3,306,464	1,180,880	236,176				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	490,500	343,350	122,625	24,525				
9	Other employee benefits	566,823	396,776	141,706	28,341				
10	Payroll taxes	482,965	338,076	120,741	24,148				
11	Fees for services (non-employees)				_				
а	Management	0							
b	Legal	69,098	10,365	51,132	7,601				
c	Accounting	79,650	0	79,650	0				
d	Lobbying	43,465	21,297	14,344	7,824				
е	Professional fundraising See Part IV, line 17	46,414			46,414				
f	Investment management fees	0							
g	Other	518,344	264,560	200,310	53,474				
12	Advertising and promotion	12,856,477	12,853,608	2,869	0				
13	Office expenses	929,519	671,026	220,002	38,491				
14	Information technology	52,198	32,342	13,450	6,406				
15	Royalties	662,838	662,838	0	0				
16	Occupancy	1,600,941	1,120,659	464,273	16,009				
17	Travel	677,273	487,682	88,182	101,409				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0							
19	Conferences, conventions, and meetings	1,155,063	1,107,838	31,607	15,618				
20	Interest	1,898,870	1,898,870	0	0				
21	Payments to affiliates	0							
22	Depreciation, depletion, and amortization	2,391,184	2,175,977	215,207	0				
23	Insurance	55,192	0	55,192	0				
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	HOF INDUCTION CEREMONIES	429,253	429,253	0	0				
b	RESEARCH & DEVELOPMENT	264,552	211,642	0	52,910				
С	MISCELLANEOUS	182,658	103,396	76,913	2,349				
d	IMAX FILM COPIES	47,246	47,246	0	0				
e	SNAG EQUIPMENT	45,420	45,420	0	0				
f	All other expenses	171,882	82,104	53,626	36,152				
25	Total functional expenses. Add lines 1 through 24f	36,978,831	32,153,411	3,961,762	863,658				
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								

Part X Balance Sheet (A) (B) Beainning of vear End of year 4,085,249 4,217,211 1 1 Cash—non-interest-bearing 9.388.467 2 8.032.171 2 7,240,430 7,775,445 3 3 4 716.981 746.919 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 75.589 Inventories for sale or use 118,264 380.835 342,915 Land, buildings, and equipment cost or other basis Complete 61.118.946 10a 10a Part VI of Schedule D 10b 37,400,809 25.511.389 23.718.137 b Less accumulated depreciation 10c 11 11 12 12 Investments—other securities See Part IV, line 11 123,290 13 123,290 13 Investments—program-related See Part IV, line 11 . . 14 14 2.987.925 15 2.438.952 15 16 50,552,830 16 47,470,629 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 7.000.399 17 6.428.026 17 Accounts payable and accrued expenses . 18 18 4,505,585 19 4,123,150 19 32,240,000 20 34,410,000 20 Liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 5,417,777 23 5,417,777 23 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties 24 472.342 25 Other liabilities Complete Part X of Schedule D 25 468,423 26 **Total liabilities.** Add lines 17 through 25 51,806,103 48,677,376 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. Unrestricted net assets -14.890.698 -15,411,348 27 27 28 13.637.425 28 14.204.601 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ -1,253,273 -1,206,747 33 Total net assets or fund balances 33 34 Total liabilities and net assets/fund balances 50.552.830 47,470,629 34

Part XI Financial Statements and Reporting

			Yes	No
L	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	☐ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization WORLD GOLF FOUNDATION INC

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Inspection **Employer identification number**

									59-299892			
Pa	rt I	Reaso	n for Pul	olic Charity Stat	us (All orga	anızatıons	must com	plete this p	art.) See ins	tructions		
he	organız	zation is i	not a private	e foundation because	ıtıs (Forlu	nes 1 throu	gh 11, check	conly one bo	x)			
1	Г	A churc	h, conventio	on of churches, or as:	sociation of o	churches s	ection 170(b)(1)(A)(i).				
2	\sqcap	A schoo	l described	ın section 170(b)(1)	(A)(ii). (Att	ach Schedi	ıle E)					
3	Γ	A hospit	al or a coop	perative hospital serv	vice organiza	ition descri	bed in sectio	n 170(b)(1)	(A)(iii).			
4	Γ			organization operate y, and state	ed in conjunc	tion with a	hospital des	cribed in sec	tion 170(b)(1)(A)(iii). Ent	er the	
5	Γ	_	-	rated for the benefit	=	or universit	y owned or o	perated by a	a governmenta	l unıt descrıb	_ ed in	
_	_			A)(iv). (Complete Pa					\/ . \/.\			
6	<u> </u>	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the										
7	10	describe	ed in	t normally receives a A)(vi) (Complete Pa		part of its	support from	a governme	ntal unit or fro	m the genera	i public	:
8	Г	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)										
9										ss		
				ties related to its ex								
		ıts supp	ort from gro	ss investment incom	ne and unrela	ited busine	ss taxable ın	come (less :	section 511 ta	x) from busir	nesses	
		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)										
LO	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).											
11 e	Г	one or m the box a Sy chec other the	nore publicly that describ Type I king this bo	anized and operated y supported organiza pes the type of suppo b Type II ex, I certify that the o	tions describ orting organiz c organization i	ped in section and of the Type III is not controlly	on 509(a)(1) complete line - Functional colled directly) or section! s 11e through lly integrated v or indirectl	509(a)(2) See gh 11h d d y by one or mo	Type II	(a)(3). :I - Oth d pers	Check her ons
f g		check th	nis box	eceived a written dei						I supporting	organız	ration,
9			persons?	ooo, nas the organiz	ation accept	.cu any gne	or contributi	on nom any	or the			
		(i) a per	son who dir	ectly or indirectly co	ntrols, eithe	r alone or t	ogether with	persons des	crıbed ın (ıı)		Yes	No
		and (III)	below, the o	joverning body of the	the support	ed organiza	ition?			11g(i)		
		. ,	•	r of a person describ	. ,					11g(ii)		
		(iii) a 3!	5% controll	ed entity of a person	described in	ı (ı) or (ıı) a	bove?			11g(iii)	
h		Provide	the followin	g information about t	he supported	d organizat	ion(s)					
(i) Name of supported organization		e of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizate col (i) list your gove docume	e ion in ted in rning	Old you n organiza col (1) o supp	otify the ation in of your	(vi) Is th organiza col (i) org in the U	ie tion in janized	A m	vii) ount of oport?
				instructions))	Yes	No	Yes	No	Yes	No	1	
				"								
ota	1											

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.) Part II

_	(Complete only if ye	Ju Checkeu the	box on line 3,	, or o or rait i	•-/		
	ection A. Public Support		T				T
Сак	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	25,502,16	5 25,466,176	26,717,052	31,362,698	32,743,868	141,791,959
	include any "unusual		, ,	, ,	, ,	, ,	
2	grants ") 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	25,502,16	5 25,466,176	26,717,052	31,362,698	32,743,868	141,791,959
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included						63,681,868
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public Support. Subtract line 5 from line 4						78,110,091
S	ection B. Total Support						
	endar year (or fiscal year	() 2005	(1) 2006	() 2227	(D 2000		(6) T : 1
	beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	A mounts from line 4	25,502,165	3,631,107	26,717,052	31,362,698	32,743,868	141,791,959
8	Gross income from interest,						
	dividends, payments received on	8,051,154	3,631,107	2,718,982	2,147,728	1,816,708	18,365,679
	securities loans, rents, royalties and income from similar	0,031,134	5,051,107	2,710,302	2,147,720	1,010,700	10,303,073
	sources						
9	Net income from unrelated						
	business activities, whether or				14,421		14,421
	not the business is regularly carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital						
	Total support (Add lines 7						
11	through 10)						160,172,059
12	Gross receipts from related activit	ıes, etc (See ıns	tructions)			12	13,400,106
13	First Five Years If the Form 990 is	for the organizat	ıon's fırst, second	, thırd, fourth, or f	ifth tax year as a !	501(c)(3) organ	nization,
	check this box and stop here	_			·		▶ ┌ `
	ection C. Computation of Pul			11 1 (5)		T T	
14	Public Support Percentage for 200			11 column (f))		14	48 766 %
15	Public Support Percentage for 200	•	,			15	38 707 %
16a	33 1/3% support test—2009. If the				ine 14 is 33 1/3%	or more, check	
h	and stop here. The organization qual 33 1/3% support test—2008. If the	•			a and line 15 is 3	3 3 1/3% or more	► ✓
	box and stop here. The organizatio	-			a, and fine 15 is 5	75 1/5 /0 OI IIIOIR	e, check this ►
17a	10%-facts-and-circumstances test	•		-	ne 13, 16a, or 16b	and line 14	•
	is 10% or more, and if the organiza						
	in Part IV how the organization me	ets the "facts an	d cırcumstances"	test The organiz	ation qualifies as a	a publicly suppo	
h	organization 10%-facts-and-circumstances test	-2008. If the ord	ianization did not d	theck a hox on lin	ne 13, 16a 16b o	r 17a and line	► □
_	15 is 10% or more, and if the orga						
	Explain in Part IV how the organiza						
	supported organization			16-161 17		h =	▶ ┌
18	Private Foundation If the organizations	tion ala not chec	k a box on line 13,	10a, 10b, 1/a o	r 1/b, check this l	oox and see	▶ □

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support	T			1	T	I
cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 Gross receipts from activities that						
3	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 Amounts included on lines 1, 2,						
/a	and 3 received from disqualified				1		
	persons						
b	A mounts 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						
	rom line 6) ction B. Total Support						
	ndar year (or fiscal year beginning						
cuic	in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
ь	Unrelated business taxable						
	income (less section 511 taxes) from businesses acquired after						
	June 30, 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						
13	IV) Total support (Add lines 9, 10c,						
13	11 and 12)						
14	First Five Years If the Form 990 is for	or the organizat	ion's first, second	l, thırd, fourth, or	fifth tax year as a	a 501(c)(3) orgar	
	check this box and stop here						► □
Se	ction C. Computation of Publ	ic Support P	ercentage				
15	Public Support Percentage for 2009			13 column (f))		15	
16	Public support percentage from 200	-		.,,		16	
	Table support personage nom 200	o o o modulo / i / i	arc 111, mrs 15			10	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ae			
17	Investment income percentage for 2				n (f))	17	
18	Investment income percentage from	•		•		18	
	33 1/3% support tests—2009. If the		•		d line 15 is more		line 17 is not
1.7a	more than 33 1/3%, check this box a					u.ii 23 1/3/0 dill	. IIIC 17 13 110t
	organization	•厂		•			
ь	33 1/3% support tests—2008. If the	organization di	d not check a box	on line 14 or line	e 19a, and line 16	5 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

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

Software ID: Software Version:

EIN: 59-2998925

Name: WORLD GOLF FOUNDATION INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Ind	T							(5)	/E\	(E)
(A) Name and Title	(B) Average hours		tion that a					(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	organization (W- 2/1099- MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Peter Dawson CHAIRMAN/PRESIDENT/DIRECTOR	1 0	X		Х				0	0	0
Carolyn F Bıvens V P/TREA SURER/DIRECTO R	1 0	X		X				0	0	0
Marsha Evans DIRECTOR	1 0	X						0	0	0
Timothy W Finchem DIRECTOR	1 0	X						0	0	0
James H Armstrong DIRECTOR	1 0	X						0	0	0
David Fay DIRECTOR	1 0	X						0	0	0
George O'Grady DIRECTOR	1 0	X						0	0	0
Joseph Steranka DIRECTOR	1 0	X						0	0	0
Helen S Atter VP LEGAL AFFAIRS/SECRETARY	40 0			Х				339,462	0	72,796
John E Peter SR VP & COO-WORLD GOLF HOF	40 0			X				343,281	0	61,049
Robert J Combs SR VP COMMUNICATIONS	40 0			Х				444,300	0	67,088
Joseph L Barrow EXECUTIVE VP/CEO THE FIRST TEE	40 0			Х				610,827	0	382,625
Stephen F Mona CHIEF EXECUTIVE OFFICER	40 0			Х				378,490	0	21,385
Kelly A Martin VP - THE FIRST TEE	40 0			X				265,010	0	42,495
Brent E Davison VP - DEVELOPMENT	40 0			Х				260,196	0	43,506
Bruce M Lahtı GENERAL MANAGER WORLD GOLF HOF	40 0				Х			197,849	0	55,625
Mary H Altman SENIOR DIRECTOR INTL MARKETING	40 0					X		215,098	0	53,282
Joseph A O'Brien SR DIRECTOR OUTCOMES & EDU	40 0					×		175,350	0	63,160
John A Sapora SR DIRECTOR LEGAL SERVICES	40 0					X		148,465	0	42,063
Mark N Lowry SR DIRECTOR NETWORK MANG	40 0					×		147,218	0	38,941
Jennifer K Weiler SR DIRECT COMMUN/SUPPORT SERV	40 0					X		136,731	0	37,896
Raul Ramos FORMER DIRCTOR INFO SYS	40 0						Х	134,185	0	23,496

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
HOF INDUCTION CEREMONIES	429,253	429,253	0	0
RESEARCH & DEVELOPMENT	264,552	211,642	0	52,910
MISCELLANEOUS	182,658	103,396	76,913	2,349
IMAX FILM COPIES	47,246	47,246	0	0
SNAG EQUIPMENT	45,420	45,420	0	0

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DLN: 93493319019100

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

If the organization answered "Yes,"	to Form 990, Part IV, Line 3, or Fo	rm 990-EZ, Part VI, line 46 (Pc	olitical Campaign Activities),
then			
0 1 504/ \/0\			

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

Se Se fth Se Na	e organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 4 ction 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line tion 501(c)(4), (5), or (6) organizations Complete Part III me of the organization RLD GOLF FOUNDATION INC	II-A D Part I ne 35a	o not c I-B Do (rega	omplet not co rding	te Part II-B Implete Part	∥-A , then
***		59-29	9892!	5		
Par	t I-A Complete if the organization is exempt under section 501(c) or is a s	ectio	on 52	7 org	ganizatio	n.
1	Provide a description of the organization's direct and indirect political campaign activities in Par	t I V				
2	Political expenditures		-	\$		
3	Volunteer hours					
Par	t I-B Complete if the organization is exempt under section 501(c)(3).					
1	Enter the amount of any excise tax incurred by the organization under section 4955			¢		
2	Enter the amount of any excise tax incurred by organization managers under section 4955			* —		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?		-	Ψ	☐ Yes	┌ No
4a	Was a correction made?				, .es	, No
b	If "Yes," describe in Part IV				, 103	, 110
	t I-C Complete if the organization is exempt under section 501(c) except	secti	on 50)1(c)	(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function ac			\$	•	
2	Enter the amount of the filing organization's funds contributed to other organizations for section!	527		. –		
	exempt funtion activities		F	\$		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line	17b	>	\$		
4	Did the filing organization file Form 1120-POL for this year?			Ψ _	┌ Yes	┌ No
5	State the names, addresses and employer identification number (EIN) of all section 527 politica were made. For each organization listed, enter the amount paid from the filing organization's fund	-				

contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

section 4911 tax for this year?

☐ Yes ☐ No

P	art II-A Complete if the organization under section 501(h)).	n is exempt under section 501(c)(3)	and filed Form 57	58 (election
<u> </u>	Check I if the filing organization belongs to			
В		x A and "limited control" provisions apply	(a) Filing	(b) Affiliated
	Limits on Lobbying I (The term "expenditures" means a		O rganization' Totals	s Group Totals
1 a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)		0
b	Total lobbying expenditures to influence a legisl	lative body (direct lobbying)	43,4	165
c	Total lobbying expenditures (add lines 1a and 1	b)	43,4	165
d	Other exempt purpose expenditures		32,987,9	53
е	Total exempt purpose expenditures (add lines 1	c and 1d)	33,031,4	18
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	1,000,0	000
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of li	ne 1f)	250,0	000
h	Subtract line 1g from line 1a If zero or less, ent	er -0-		
i	Subtract line 1f from line 1c If zero or less, ento	er - 0 -		

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total				
2a	Lobbying non-taxable amount		1,000,000	1,000,000	1,000,000	3,000,000				
b	Lobbying ceiling amount (150% of line 2a, column(e))					4,500,000				
c	Total lobbying expenditures		90,000	145,000	43,464	278,464				
_d	Grassroots non-taxable amount		250,000	250,000	250,000	750,000				
е 	Grassroots ceiling amount (150% of line 2d, column (e))					1,125,000				
f	Grassroots lobbying expenditures				0	0				

che	dule C (Form 990 or 990-EZ) 200						Page 3
Pa	rt II-B Complete if the or (election under se	rganization is exempt under ection 501(h)).	section 501(c)(3) and has I				
			-	(;	a)	(b)
				Yes	No	A mo	unt
1		anization attempt to influence foreign t to influence public opinion on a legis					
а	Volunteers?						
b	Paid staff or management (includ	e compensation in expenses reported	l on lines 1c through 1i)?				
c	Media advertisements?						
d	Mailings to members, legislators	, or the public?					
е	Publications, or published or broa	adcast statements?					
f	Grants to other organizations for	lobbying purposes?					
g	Direct contact with legislators, th	neır staffs, government officials, or a l	egislative body?				
h	Rallies, demonstrations, seminar	s, conventions, speeches, lectures, c	rany sımılar means?				
i	Other activities? If "Yes," descri	ibe in Part IV					
j	Total lines 1c through 1:						
2a	Did the activities in line 1 cause	the organization to be not described	n section 501(c)(3)?				
Ь	If "Yes," enter the amount of any	tax incurred under section 4912					
c	If "Yes," enter the amount of any	tax incurred by organization manage	rs under section 4912				
d	If the filing organization incurred	a section 4912 tax, did it file Form 4	720 for this year?				
Par	t III-A Complete if the or 501(c)(6).	ganization is exempt under	section 501(c)(4), section !	501(c)(5), o		
	W					Yes	s No
1		nore) dues received nondeductible by			-	2	
2	=	n-house lobbying expenditures of \$2,0			-	3	
3		ryover lobbying and political expendit		-01/-	\(\(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
2611	501(c)(6) if BOTH	rganization is exempt under Part III-A, lines 1 and 2 are					ion
	answered "Yes".						
1	Dues, assessments and similar a			1			
2	expenses for which the section 5	bbbying and political expenditures (do 27(f) tax was paid).	o not include amounts of political				
a	Current year	(. , para).		2a			
ь	Carryover from last year			2b			
c	Total			2c			
3	Aggregate amount reported in se	ction 6033(e)(1)(A) notices of nonde	ductible section 162(e) dues	3			
4	If notices were sent and the amo	unt on line 2c exceeds the amount or	line 3, what portion of the excess				
	does the organization agree to ca political expenditure next year?	arryover to the reasonable estimate o	f nondeductible lobbying and	4			
5	Taxable amount of lobbying and p	political expenditures (see instruction	ıs)	5			
Pä	rt IV Supplemental Info	ormation					
	mplete this part to provide the des o, complete this part for any addit	criptions required for Part I-A, line 1, ional information	Part I-B, line 4, Part I-C, line 5, an	d Part	II-B, lıne	11	
	Ident if ier	Return Reference	Explana	t ion			

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DLN: 93493319019100

OMB No 1545-0047

Supplemental Financial Statements

Department of the Treasury

SCHEDULE D (Form 990)

> ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

erna ——	Revenue Service Attach to Form 990.	► See separate instructions.		Inspe	ction
	me of the organization RLD GOLF FOUNDATION INC		Employer id	dentification nun	nber
			59-29989	25	
Pa	rt I Organizations Maintaining Donor Advised		ın <mark>ds or A</mark> c	counts. Comp	lete if the
	organization answered "Yes" to Form 990, Part	IV, line 6. (a) Donor advised funds	/h\ =··-	ds and other acc	ounts
	Total number at end of year	(a) Donor advised lunds	(b) Fun	as and other acc	ounts
	Aggregate contributions to (during year)				
,	Aggregate grants from (during year)				
, I	Aggregate value at end of year				
1	Did the organization inform all donors and donor advisors in w funds are the organization's property, subject to the organizat	cion's exclusive legal control?		☐ Yes	s 「No
ı	Did the organization inform all grantees, donors, and donor ad used only for charitable purposes and not for the benefit of the conferring impermissible private benefit		•	ose T Ye s	s 「No
Pa	rt II Conservation Easements. Complete if the or	ganızatıon answered "Yes" to	Form 990,	Part IV, line 7	
	Purpose(s) of conservation easements held by the organization				
	Preservation of land for public use (e.g., recreation or ple	· <u>-</u>			irea
	Protection of natural habitat	Preservation of a c	ertified histo	ric structure	
	Preservation of open space				
2	Complete lines 2a-2d if the organization held a qualified conseasement on the last day of the tax year	servation contribution in the form	of a conserva	ation	
	easement on the last day of the tax year	Г	Hel	d at the End of t	he Vear
а	Total number of conservation easements	<u> </u>	2a	dat the Lild of t	iic reai
ь	Total acreage restricted by conservation easements	F	2b		
c	Number of conservation easements on a certified historic stru	ucture included in (a)	2c		
d	Number of conservation easements included in (c) acquired a	` ` '	2d		
, -	Number of conservation easements modified, transferred, rele	L		nization during	
,	the taxable year -	saseu, extiliguisheu, or terminate	u by the orga	mzation during	
	· ————————————————————————————————————				
	Number of states where property subject to conservation eas	ement is located ►			
•	Does the organization have a written policy regarding the peri enforcement of the conservation easements it holds?	odic monitoring, inspection, hand	ling of violati	ons, and Tye s	s 「No
•	Staff and volunteer hours devoted to monitoring, inspecting a	nd enforcing conservation easem	ents during th	ıe year ►	
'	A mount of expenses incurred in monitoring, inspecting, and e	nforcing conservation easements	during the y	ear 🟲 \$	
•	Does each conservation easement reported on line 2(d) abov $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	e satisfy the requirements of sec	tion	☐ Yes	s
)	In Part XIV, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnot the organization's accounting for conservation easements		•	,	
ar	Organizations Maintaining Collections of A Complete if the organization answered "Yes" to		or Other S	milar Assets	
.a	If the organization elected, as permitted under SFAS 116, not art, historical treasures, or other similar assets held for public provide, in Part XIV, the text of the footnote to its financial st	t to report in its revenue stateme c exhibition, education or researc	h ın furtherar		
b	If the organization elected, as permitted under SFAS 116, to historical treasures, or other similar assets held for public ex provide the following amounts relating to these items	•			
	(i) Revenues included in Form 990, Part VIII, line 1		•	·\$	448,985
	(ii) Assets included in Form 990, Part X		.	\$ 1	,135,083
<u>:</u>	If the organization received or held works of art, historical tre following amounts required to be reported under SFAS 116 re				
а	Revenues included in Form 990, Part VIII, line 1	-	.	\$	
				т	

b Assets included in Form 990, Part X

ar	Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tre</u>	asure	<u>s, or 0</u>	the	<u>r Similai</u>	ASSE	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ie foll	owing th	at are a	sıgnıfıca	nt u	se of its co	llectio	n	
а	▼ Public exhibition		d	~	Loan or	exchan	ige progr	ams				
ь	Scholarly research		e	Γ	Other							
c	▼ Preservation for future generations											
ļ	Provide a description of the organization's co	ollections and expla	ain hov	v the	/ further	the orga	anızatıon	's ex	empt purp	ose in		
•	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,					ılar	Г	Yes	√ No
۹a۱	rt IV Escrow and Custodial Arrang						nswere	d "Y	es" to For	m 990),	
	Part IV, line 9, or reported an ar											
a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other interm	ediary	for c	ontributi	ons or o	therass	ets r	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng ta	able		_					
							-	_		A mou	ınt	
C	Beginning balance						F	1 c				
d	Additions during the year							1d				
e	Distributions during the year						L	1e				
f	Ending balance						L	1f				
а	Did the organization include an amount on Fe	orm 990, Part X, lın	e 21?							Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\	/										
a	rt V Endowment Funds. Complete		n ans	were								
		(a)Current Year	(b)	Prior \	/ear	(c)Two Ye	ears Back	(d)	Three Years E	Back (e	Four Ye	ears Back
3	Beginning of year balance											
b	Contributions											
C	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
9	Provide the estimated percentage of the year	r end halance held										
			u s									
а	Board designated or quasi-endowment	%										
b	Permanent endowment 🕨 %	1										
C	Term endowment ► %					!!		ı e	A.L			
а	Are there endowment funds not in the posse organization by	ssion of the organiz	ation	tnata	ire neia i	and adm	iinistered	ıor	tne		Yes	No
	(i) unrelated organizations									3a(i)		
	(ii) related organizations									3a(ii)		
b	If "Yes" to 3a(II), are the related organization	ns listed as require	d on S	ched	ule R?					3b		
	Describe in Part XIV the intended uses of th											
аI	rt VI Investments—Land, Building	s, and Equipme	nt. S	ee F	orm 99	<u>0, Part</u>	X, line	10.				
	Description of investment				Cost or ot (Investm		Cost or ot asıs (othe		(c) Accumu depreciat		(d) Boo	ok value
а	Land						33	,701				33,701
b	Buildings		•				35,032	,885	14,38	33,566	2	0,649,319
c	Leasehold improvements											
d	Equipment											
e	Other						26,052	,360	23,0:	17,243		2,612,117

23,295,137

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value	
Financial derivatives		Cost of the of year market value	
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See		<u> </u> 12	
		(c) Method 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.)			
Totali (colaimi (b) shead equal (cim sse) (are n) col (b) mic 1s)			
Part IX Other Assets. See Form 990, Part X, III (a) Descrip		(b) Book value	
DEBT ISSUE COSTS	ACION .		64,518
DEPOSITS			38,137
ST JOHNS COUNTY INDUS AUTH RE			45,931
SNAG EQUIPMENT		8	90,366
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		38,952
Part X Other Liabilities. See Form 990, Part X	, line 25.		
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes	0		
UNAMORTIZED BOND PREMIUM	154,985		
DEFERRED BONUS PAYABLE	313,438		
	,		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	468,423		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	37,200,984
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	36,978,831
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	222,153
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-175,627
9	Total adjustments (net) Add lines 4 - 8	9	-175,627
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	46,526
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	39,241,031
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	2,040,047
3	Subtract line 2e from line 1	3	37,200,984
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)		
С	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	37,200,984
1	Reconciliation of Expenses per Audited Financial Statements With Expenses Total expenses and losses per audited financial	s per	39,641,778
_	statements	1	39,041,778
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d 2,662,947		
e	Add lines 2a through 2d	2e	2,662,947
3	Subtract line 2e from line 1	3	36,978,831
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		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	36,978,831

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Part XIV Supplemental Information

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 Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
OTHER REVENUE ON BOOKS BUT NOT ON RETURN		REIMBURSEMENT OF MANAGEMENT SERVICE 1,848,023 REIMBURSEMENT OF EXPENSE 35,000 DIRECT EXPENSES 19,238 RECLASS BETWEEN INCOME AND EXPENSE 395,563 NON-INCLUDIBLE SUBSIDARY 165,224 NON-CASH CONTRIBUTION OF ARIFACTS -TIMING DIFF -423,000 ROUNDING -1 TOTAL 2,040,047
OTHER EXPENSES ON BOOKS BUT NOT ON RETURN		REIMBURSEMENT OF MANAGEMENT SERVICE 1,848,023 REIMBURSEMENT OF EXPENSE 35,000 DIRECT EXPENSES 19,238 RECLASS BETWEEN INCOME AND EXPENSE 395,563 NON-INCLUDIBLE SUBSIDARY 189,497 Pension related settlement costs 175,622 ROUNDING 4 TOTAL 2,662,947
SCHEDULE D, PART III, QUESTION 4		THE WORLD GOLF HALL OF FAME'S PROGRAM ACTIVITIES INCLUDE A MUSEUM OF GOLF-RELATED ARTIFACTS OF HISTORICAL AND EDUCATIONAL SIGNIFICANCE THESE ITEMS ALSO INCLUDE MEMORBILIA FROM THE INDUCTEES' CAREERS AND PERSONAL LIVES, EXAMPLES FROM CLUB AND BALL MAKERS, AND TOOLS USED TO CRAFT THESE ITEMS SOME OF THE COLLECTION IS OWNED BY THE WORLD GOLF FOUNDATION AND SOME OF IT IS ON LOAN FROM THE ARTIFACT OWNER
OTHER CHANGES IN NET ASSETS	,	PENSION RELATED SETTLEMENT COSTS -175,622 ROUNDING -5 TOTAL -175,627

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SCHEDULE F

Department of the Treasury

(Form 990)

Totals.

As Filed Data -

DLN: 93493319019100

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public

Intern	al Revenue Service						Inspection
	ne of the organization RLD GOLF FOUNDATION	IINC				Employer ide	ntification number
						59-299892	5
P		rmation on Ac 990, Part IV, Irr		ide the United States	s. Complete	ıf the orgar	nization answered
1		•		ecords to substantiate	the amount	of the grant	s or
	assistance, the grant	ees' eligibility fo	or the grants or	assistance, and the se	lection criter	ıa used to a	ward
	the grants or assistar	nce?					. Tyes No
2	For grant makers. Descr United States	ibe in Part IV the	organization's pi	ocedures for monitoring th	ne use of grant	: funds outsıd	e the
3	Activites per Region (U	se Schedule F-1	(Form 990) If ad	ditional space is needed)			
	(a) Region	(b) Number of offices in the	employees or	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in	ıs a progra	y listed in (d) m service, ecific type of	(f) Total expenditures for region
		region	agents in region	the region)	service(s)		
Eas	t Asia and the Pacific	0	0	Fundraising			
	ope (Including Iceland and enland)	0	0	Fundraising			

Part IV	Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000									
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)		
2 Enter total n tax-exempt	number of recipions by the IRS, or f	ent organizations lis or which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►			
3 Enter total n	umber of other	organizations or en	tities					: (Earm 990) 2009		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

Identifier	ReturnReference	ın Part I, line 2, and any additional information. Explanation
CHEDULE F, PART 1, QUESTIONS		WORLD GOLF FOUNDATION DID NOT MAKE ANY GRANTS
AND 2		OUTSIDE THE UNITED STATES DURING 2009
<u> </u>		

As Filed Data -

DLN: 93493319019100

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

2009 Open to Public

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Internal Revenue Service	F Allac	נוו נט רטוווו 990	OI FUIIII 9	9U-EZ.	- See separate instructi	ulis.	Inspection
Name of the organization WORLD GOLF FOUNDAT							tification number
Dowl T. Consideration	an Antiniaina Camala					59-2998925	l 17
	ng Activities. Comple Z filers are not require		_			to Form 990, Part IV	, line 17.
1 Indicate whether th	e organization raised fund	s through a	ny of the	follo	wing activities Che	eck all that apply	
a Mail solicitations e Solicitation of non-go					-government grants		
b 🔽 Internet and e-	mail solicitations		f	굣	Solicitation of gov	ernment grants	
c 🔽 Phone solicitati	ons		g	굣	Special fundraisin	g events	
d 🔽 In-person solic	itations						
b If "Yes," list the ter	sted in Form 990, Part VI i highest paid individuals o at least \$5,000 by the or	or entities (1	fundraıs	ers)p	ursuant to agreeme	ents under which the fur	
(i) Name of Individua or entity (fundraiser	I (III) A CTIVITY	(iii) [fundraise custod contro contribut	r have ly or ol of) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
James Mulvihill	Direct So- licitations		No		1,233,900	46,414	0
Total			٠		1,233,900	46,414	0
3 List all states in w	hich the organization is re	egistered or	license	d to s	olicit funds or has b	peen notified it is exemp	ot from registration or

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

AL,AK,AZ,AR,CA,CO,CT,DE,DC,FL,GA,HI,ID,IL,IN,IA,KS,KY,LA,ME,MD,MA,MI,MN,MS,MO,MT,NE,NV,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,RI,SC,SD,TN,TX,UT,VT,VA,WA,WV,WI,WY

		(a) Event #1	(b) Event #2	(c) O ther Events	(Add col		
		(event type)	(event type)	(total number)	co	l (c))	
\$ 1	1 Gross receipts	43,054	1			43	3,054
enileve Zevelikie	Less Charitable	30,938	3			30	0,938
3	Gross income (line 1 minus line 2)	12,116	5			12	2,110
4	4 Cash prizes						
္က 5	5 Non-cash prizes						
92 e	6 Rent/facility costs						
Expenses	7 Food and beverages						
. l	8 Entertainment						
۽ ا ڌ	9 Other direct expenses .	31,354	1			31	1,354
10	O Direct expense summary Add lir	nes 4 through 9 ın column	ı(d)	🛌		31	1,354
1	1 Net income summary Combine I	nes 3, column d, and line	10		,	-19	9,238
Part	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted mor	e than	J
Kevenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(Add col	tal gamı (a) thr l (c))	
	1 Gross revenue				1		
မွ ႏ	2 Cash prizes						
expenses	3 Non-cash prizes						
	4 Rent/facility costs						
, ਹਾਵਕ 1	5 Other direct expenses						
1	6 Volunteer labor	│ Yes	│ Yes				
	7 Direct expense summary Add line						
	8 Net gaming income summary Con	idine lines I, column d, a	nd line /	<u> </u>		Yes	No
	Enter the state(s) in which the organiz Is the organization licensed to operate				· 9a		
ь I	If "No," Explain						
	Were any of the organization's gaming	licenses revoked, susper	nded or terminated during	the tax year?	10a		
-	Does the organization operate gaming		_				

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I (Form 990)

Department of the Treasury

Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

OMB No 1545-0047

2009

DLN: 93493319019100

Open to Public Inspection

Name of the organization	ame of the organization ORLD GOLF FOUNDATION INC						Employer identification number		
						59-2998925			
Part I General Informat	on on Grants and	l Assistance							
 Does the organization maintal the selection criteria used to a Describe in Part IV the organization 	award the grants or as	sıstance?					Г Yes ГМ		
Form 990, Part IV, I	ne 21 for any recip	ient that received r	rganizations in the nore than \$5,000. Ch needed	eck this box if no one	recipient receive	d more than \$5,000.	. Use		
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance		
See Additional Data Table									

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
A cademic Scholarships From the First Tee	119	155,500			
See Additional Data Table					
-					

Ident if ier	Return Reference	Explanat ion				
SCHEDULE I PART 1 LINE 2		GRANTS ARE ONLY MADE TO TAX-EXEMPT ORGANIZATIONS LICENSED TO DELIVER THE FIRST TEE PROGRAMS, AND SUCH LICENSE IS LIMITED TO A SPECIFIC US GEOGRAPHICAL SERVICE AREA				
		- 				
<u> </u>						

Software ID:

Software Version:

EIN: 59-2998925

Name: WORLD GOLF FOUNDATION INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of (b) EIN (c) IRC Code section (d) Amount of cash (e) Amount of non- (f) Method of (c)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Aiken Jr Golf Foundation901 Houndslake Dr Aiken, SC 29803	26-4784141	501 (c)(3)	250,000				General Support
Albemarle County Public Schools401 McIntire Road Charlottesville,VA 22902	54-6001102	501 (c) (1)		17,605	FMV	NSP Equipment	General Support
A merican Junior Golf Association1980 Sports Club Drive Braselton, GA 30517	58-1433914	501 (c)(3)	10,000				General Support
Anchorage School District 5530 E Northern Lights Blvd Anchorage, AK 99504	92-6000078	501 (c) (1)		11,003	FMV	NSP Equipment	General Support
Berkeley County School District229 East Main Street Moncks Corner, SC 29461	57-6000313	501 (c) (1)		7,702	FMV	NSP Equipment	General Support
Chesterfield County Public SchoolsPO Box 10 Chesterfield, VA 23832	54-6001210	501 (c) (1)		11,003	FMV	NSP Equipment	General Support
Chicago Public Schools125 South Clark Street Chicago, IL 60603	36-6005821	501 (c) (1)		13,204	FMV	NSP Equipment	General Support
Columbus City Schools270 East State Street Columbus, OH 43215	31-6400416	501 (c) (1)		18,706	FMV	NSP Equipment	General Support
Cumberland County Schools 2465 Gillespie Street Fayetteville, NC 28306	56-6001015	501 (c) (1)		11,003	FMV	NSP Equipment	General Support
Department of Defense - Aır Force		501 (c) (1)		18,706	FMV	NSP Equipment	General Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Department of Defense - Army		501 (c) (1)		15,405	FMV	NSP Equipment	: General Support
Department of Defense - Navy		501 (c) (1)		17,605	5 FMV	NSP Equipment	: General Support
District of Columbia Public Schools1200 First Street NE Washington, DC 20002	53-6001131	501 (c) (1)		17,605	5 FMV	NSP Equipment	: General Support
Golf Fore Fun IncPO Box 236 Clemmons, NC 27012	20-8114680	501 (c) (3)		9,903	B FMV	NSP Equipment	: General Support
Greenville County Schools SC25 Owens St Greenville, SC 29611	20-3956266	501 (c) (1)		11,003	B FMV	NSP Equipment	General Support
Hickory Public Schools432 Fourth Ave SW Hickory, NC 28602	56-6001049	501 (c) (1)		12,104	fMV	NSP Equipment	General Support
Horry County Schools 335 Four Mile Rd PO Box 260005 Conway, SC 29528	57-6000364	501 (c) (1)		11,003	FMV	NSP Equipment	General Support
Houston Golf Association 5810 Wilson Road Suite 112 Humble,TX 77396	74-1486171	501 (c) (3)		41,813	FMV	NSP Equipment	General Support
Indianapolis Public Schools 120 E Walnut St Indianapolis, IN 46204	35-6002486	501 (c)(1)		22,007	7 FMV	NSP Equipment	General Support
Loudoun County Public Schools21000 Education Court Ashburn, VA 20148	54-6001395	501 (c)(1)		14,304	‡ FM∨	NSP Equipment	General Support

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States												
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
Meridian Valley Country Club Inc24830 136th Ave SE Kent, WA 98042	91-0792836	501 (c)(3)		24,207	, FMV	NSP Equipment	t General Support					
Metropolitan Youth Development200 North Walker Ave Oklahoma City, OK 73102	73-1623255	501 (c)(3)	125,000				General Support					
Montgomery County Public Schools850 Hungerford Drive Rockville,MD 20850	52-6000989	501 (c) (1)		11,003	FM∨	NSP Equipment	t General Support					
New Brunswick Public Schools268 Baldwin Street New Brunswick, NJ 08901	22-6002128	501 (c)(1)		8,803	B FMV	NSP Equipment	t General Support					
Newark Public Schools223 Broadway Newark,NJ 07104	22-6002140	501 (c)(1)		9,903	B FMV	NSP Equipment	t General Support					
Norwalk Public Schools125 East Avenue PO Box 6001 Norwalk,CT 068526001	06-6011881	501 (c)(1)		15,405	5 FMV	NSP Equipment	t General Support					
Osceola Public Schools817 Bill Beck Blvd Kissimmee, FL 34744	59-6000779	501 (c) (1)		28,609	FMV	NSP Equipment	t General Support					
Osprey Events1100 Spring Street Suite 770 Atlanta, GA 30309	37-1463349	501 (c) (3)	8,000				General Support					
Pasadena Unified School District351 South Hudson Avenue Pasadena, CA 91109	95-6002372	501 (c)(1)		7,702	2 FMV	NSP Equipment	t General Support					
Phoenix County1817 N 7th St Phoenix,AZ 85006	86-6000478	501 (c)(1)		7,702	FMV	NSP Equipment	t General Support					

(a) Name and address of	(b) EIN	(c) IRC Code section	(d) A mount of cash	(e) A mount of non-	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government		ıf applıcable	grant	cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance ,	or assistance
Portsmouth Public Schools PO Box 998 Portsmouth, VA 237050998	54-6001517	501 (c) (1)		15,405	5 FMV	NSP Equipment	General Support
Richmond Community Schools300 Hub Etchison Parkway Richmond,IN 47374	35-1071211	501 (c)(1)		11,003	B FMV	NSP Equipment	General Support
Sacramento Unified School District5735 47th Ave Sacramento, CA 95824	94-6002491	501 (c) (1)		6,602	2 FMV	NSP Equipment	General Support
Salem-Keizer Public Schools 2450 Lancaster Dr NE Salem, OR 97305	93-6000763	501 (c) (1)		19,806	5 FMV	NSP Equipment	General Support
San Diego Unified School District4100 Normal Street San Diego, CA 92103	95-6002781	501 (c) (1)		12,104	I FM∨	NSP Equipment	General Support
Seattle Public SchoolsPO Box 34165 Seattle,WA 981241165	91-6001541	501 (c) (1)		9,903	B FMV	NSP Equipment	General Support
South Dakota Golf Association4809 W 41st Street Sioux Falls, SD 57106	46-0449824	501 (c) (3)		13,204	fMV	NSP Equipment	General Support
South Portland Schools130 Wescott Road South Portland, ME 04106	01-6000036	5 501 (c) (1)		7,702	2 FMV	NSP Equipment	General Support
Spokane School District200 N Bernard Spokane, WA 99201	91-6001582	501 (c) (1)		11,003	B FMV	NSP Equipment	General Support
St Augustine Empty Stocking FundPO Box 1630 St Augustine, FL 32085	58-6045083	501 (c) (3)	5,850				General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of (b) EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) 501 (c)(1) FMV Syracuse City School District 15-6010157 6,602 NSP Equipment General Support 1025 Erie Blvd West Syracuse, NY 13204 The First Tee of AkronMud 34-1886744 501 (c)(3) Progam Support Run Park 2000 South 10,000 Hawkins Akron, OH 44314 The First Tee of Alaska8847 20-3114983 501 (c)(3) 6,831 FMV Progam Support Golf Equipment Sahalee Dr 23,500 Anchorage, AK 99507 The First Tee of AtlantaJohn 58-2414794 501 (c)(3) 3,252 FMV Golf Equipment Progam Support A White Park 1053 Cascade 21,175 Atlanta, GA 30311 501 (c)(3) 3.259 The First Tee of Augusta 58-2415361 FMV Progam Support Golf Equipment 3165 Damascus Rd 8,250 Augusta, GA 30909 The First Tee of Central 10-0189537 501 (c)(3) 3,237 FMV Golf Equipment Progam Support Arkansas1 First Tee Way 8,250 Little Rock, AR 72204 501 (c)(3) The First Tee of Central 77-0524816 3,319 FMV Golf Equipment Progam Support Coast226 Ocean View Ave 8,250 Carpinteria, CA 93013 The First Tee of Charlotte 56-2245026 501 (c)(3) Progam Support 2661 Barringer Drive 11,000 Charlotte, NC 28208 54-6001202 The First Tee of 501 (c)(3) Progam Support Charlottesville1400 Pen Park 13,500 Road Charlottesville, VA 22901 501 (c)(3) Progam Support The First Tee of Cleveland 34-1915692 3841 Washington Park 10,000 Boulevard Cleveland, OH 44105

Form 990,Schedule I, Par	rt II, Grants an	ıd Other Assistanc	e to Governments	and Organization	s in the United Sta	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance										
The First Tee of Cleveland County 3005 Longwood Drive Shelby, NC 28152	58-2016066	501 (c) (3)	10,000				Progam Support										
The First Tee of Columbia Basin830 North Columbia Center Blvd Kennewick, WA 99336	34-2043301	501 (c) (3)	13,500				Progam Support										
The First Tee of Connecticut 525 Brook Street Suite 206 Rocky Hill, CT 06067	06-1510744	501 (c) (3)	96,350	3,270	FMV	Golf Equipment	: Progam Support										
The First Tee of Dallas2909 Cole Ave Suite 305 Dallas,TX 75204	75-2602809	501 (c) (3)	5,850				Progam Support										
The First Tee of Delaware 800 N DuPont Rd Wilmington, DE 19807	33-1103722	501 (c) (3)	21,750	3,256	5 FMV	Golf Equipment	: Progam Support										
The First Tee of Fort Worth PO BOX 4767 Fort Worth, TX 761640767	20-5545252	501 (c) (3)	8,250	3,239	FMV	Golf Equipment	: Progam Support										
The First Tee of Fresno7492 N Bryan Avenue Fresno, CA 93722	02-0792999	501 (c) (3)	11,000				Progam Support										
The First Tee of Greater Charleston222 West Coleman Blvd Suite 202 Mount Pleasant, SC 29464	20-3959266	501 (c)(3)	36,500	6,588	B FMV	Golf Equipment	: Progam Support										
The First Tee of Greater Des Moines 8515 Douglas Avenue Suite 25 Urbandale, IA 503222924	42-1500562	501 (c) (3)	13,500				Progam Support										
The First Tee of Greater El Paso6900 Delta Drive El Paso,TX 79905	26-0399030	501 (c) (3)	28,250	3,269	FMV	Golf Equipment	Progam Support										

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of (b) EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) 501 (c)(3) 20-0057543 3,241 FMV The First Tee of Greater Golf Equipment Progam Support Miami Valley6122 Trenton-8,250 Franklın Rd Middletown, OH 45042 3,250 The First Tee of Greater New 75-3160528 501 (c)(3) FMV Golf Equipment Progam Support Orleans 1050 S Jefferson 23,250 Davis Pkwy Sui New Orleans, LA 70125 501 (c)(3) The First Tee of GreenvillePO 57-1021847 Progam Support Box 817 6,000 Greenville, SC 29602 54-1929910 501 (c)(3) 6.496 FMV Golf Equipment The First Tee of Hampton Progam Support Roads2400 Tournament Dr 16,500 Virginia Beach, VA 23456 501 (c)(3) 6.950 The First Tee of Hawaii68-81-0655388 FMV Progam Support Golf Equipment 369 Crozier Drive 16,500 Waialua, HI 96791 The First Tee of Idaho849 E 04-3801123 501 (c)(3) 3,358 FMV Golf Equipment Progam Support State St Suite 105 8,250 Eagle, ID 83616 The First Tee of Jacksonville 59-3577327 501 (c)(3) 3,344 FMV Golf Equipment Progam Support 1157 MB01 Golfair Blvd 8,250 Jacksonville, FL 32209 The First Tee of Killeen777 74-2776059 501 (c)(3) 3,261 FMV Golf Equipment Progam Support Service Road Hwy 190 East 8,250 Nolanville, TX 76559 The First Tee of Lexington 31-1524605 501 (c)(3) Progam Support 3403 Kearney Rd 10,000 Lexington, KY 40511 501 (c)(3) The First Tee of 13-4245342 3,319 FMV Golf Equipment Progam Support Massachusetts300 Arnold 21,950 Palmer Blvd Norton, MA 02766

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) 501 (c)(3) FMV The First Tee of Memphis 62-1567000 3,227 Golf Equipment Progam Support 2146 Ball Rd 4,125 Memphis, TN 38114 The First Tee of Meridian 20-3884142 501 (c)(3) 3,241 FMV Golf Equipment Progam Support 2113 Front Street Suite C 21,750 Meridian, MS 39301 501 (c)(3) The First Tee of Metropolitan 31-1724122 Progam Support New YorkMosholu Golf 201,039 Course 3545 Jerome A Bronx, NY 10467 The First Tee of Mid-26-1745419 501 (c)(3) Progam Support Michigan124 W Allegan St 9,000 Ste 700 Lansing, MI 48933 501 (c)(3) The First Tee of Monmouth 30-0238834 3,257 FMV Golf Equipment Progam Support and Ocean Counties 1003 23,250 Wickapecko Drive Ocean, NJ 07712 The First Tee of Monterey 26-0015069 501 (c)(3) 3,292 FMV Golf Equipment Progam Support County1551 Beacon Hill 8,250 Drive Salinas, CA 93905 501 (c)(3) FMV The First Tee of Montgomery 63-1262981 3,317 Golf Equipment Progam Support 8650 Minnie Brown Rd Suite 8,250 166 Montgomery, AL 36117 The First Tee of Nashville 58-1893478 501 (c)(3) 3,244 FMV Golf Equipment Progam Support 2009 Sevier Street 8,250 Nashville, TN 37206 The First Tee of North Pudget 90-0179136 501 (c)(3) 6,599 FMV Golf Equipment Progam Support Sound (Snohomish Co5616 16,500 133rd Avenue SE Snohomish, WA 982909449 501 (c)(3) Progam Support The First Tee of Northeast 14-1931565 Louisiana29 Melanie Drive 7,000 Monroe, LA 71203

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (c) IRC Code section (a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) 501 (c)(3) 59-3288799 3,275 FMV The First Tee of Northwest Golf Equipment Progam Support Florida101 W Main Street 15,250 Pensacola, FL 32502 The First Tee of Northwest 41-2063016 501 (c)(3) 3,313 FMV Golf Equipment Progam Support Louisiana3544 Greenbriar 8,250 Drive Shreveport, LA 71109 The First Tee of Oakland 33-1103128 501 (c)(3) Progam Support 11425 Golf Links Road 15,000 Oakland, CA 94605 The First Tee of Omaha6315 47-0809385 501 (c)(3) 3,209 FMV Golf Equipment Progam Support North 30th St 8,250 Omaha, NE 68152 The First Tee of Pasadena 25-1924033 501 (c)(3) 3,297 FMV Golf Equipment Progam Support 1133 Rosemont Avenue 23,250 Pasadena, CA 91103 501 (c)(3) The First Tee of Phoenix 52-2103204 3,314 FMV Golf Equipment Progam Support 9510 South 7th Street 8,250 Phoenix, AZ 85042 501 (c)(3) The First Tee of Pine Ridge 30-0229879 Progam Support Indian Reservation316 13,500 Larimer Street Rushville, NE 69360 The First Tee of Pittsburgh 01-0867393 501 (c)(3) Progam Support The Bob O Connor Golf 15.000 Course at Sch Pittsburgh, PA 15217 The First Tee of Prince 501 (c)(3) 6,512 FMV Golf Equipment Progam Support William Co12350 Cotton Mill 16,500 Drive Woodbridge, VA 22192 The First Tee of Pueblo3200 84-0404925 501 (c)(3) 6,504 FMV Golf Equipment Progam Support Spaulding Avenue 16,500 Pueblo, CO 81008

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) 501 (c)(3) 3,256 FMV The First Tee of Raritan 11-3826837 Golf Equipment Progam Support Valley411 Joyce Kılmer Ave 8,250 Suite 9 New Brunswick, NJ 08901 6,532 The First Tee of San Antonio 74-1364915 501 (c)(3) FMV Golf Equipment Progam Support One Valero Way B-1-F 16,500 San Antonio, TX 782691616 501 (c)(3) The First Tee of San Diego 33-0617741 3,330 FMV Golf Equipment Progam Support 4085 52nd Street 8,250 San Diego, CA 92105 501 (c)(3) Progam Support The First Tee of San Joaquin 68-0460495 2930 Driftwood PI 21 13,500 Stockton, CA 95219 The First Tee of Santa Fe223 501 (c)(3) 20-3048071 Progam Support North Guadalupe 501 15,000 Santa Fe, NM 87505 The First Tee of Savannah 00-0011364 501 (c)(3) 6,590 FMV Golf Equipment Progam Support 392 Commercial Drive Suite 16,500 130 Savannah, GA 31406 The First Tee of Shawnee 48-0780983 501 (c)(3) Progam Support County1000 SE Hancock 11,000 Topeka, KS 66607 501 (c)(3) The First Tee of South 46-0449824 Progam Support Dakota2604 West Russell St 15,000 Sioux Falls, SD 57104 The First Tee of Southern 94-2621058 501 (c)(3) 3,304 FMV Golf Equipment Progam Support Nevada2625 N Green Valley 8,250 Parkway Sui Henderson, NV 89014 The First Tee of Tampa Bay 59-1742909 501 (c)(3) 3,275 FMV Golf Equipment Progam Support 7746 Temple Terrace 8,250 Highway Temple Terrace, FL 33637

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
The First Tee of the Coachella ValleyThe Golf Center at Palm Desert 74-945 Sheryl Ave Palm Desert, CA 92260	91-2143285	5 501 (c)(3)	18,500				Progam Support				
The First Tee of the Triad 2460 Northwick Drive 107 WinstonSalem, NC 27103	20-8114680	501 (c) (3)	13,500				Progam Support				
The First Tee of Tucson1400 West Speedway Blvd Tucson, AZ 85745	45-0511766	501 (c) (3)	16,500	5,435	FMV	Golf Equipment	Progam Support				
The First Tee of Yakıma602 Fencrest Yakıma, WA 98909	20-5416294	501 (c) (3)	13,500				Progam Support				
Thunderbird Junior Golf Foundation7226 North 16th Street Suite 100 Phoenix,AZ 85020	52-2103204	501 (c) (3)		31,910	FMV	NSP Equipment	General Support				
Triple A Youth Foundation 5163 Clayton Road St Louis, MO 63110	43-5066416	5 501 (c) (3)	35,000				General Support				
United Way of St Johns County117 Bridge Street St Augustine, FL 32084	59-6018986	5 501 (c) (3)	5,850				General Support				
Utah Sports Commission201 South Main Suite 2125 Salt Lake City, UT 84111	87-0651075	501 (c) (3)	10,000				General Support				
Vacaville Unified School District401 Nut Tree Road Vacaville, CA 95687	74-3092244	501 (c) (1)		11,003	FMV	NSP Equipment	General Support				
Vermont Department of Education120 State Street Montpelier, VT 05620		501 (c)(1)		31,910	FMV	NSP Equipment	General Support				

Form 990,Schedule I, Par	rt II, Grants an	<u>id Other Assistance</u>	e to Governments	and Organization:	s in the United Sta'	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Yakıma Youth Golf AssociationPO Box 787 Yakıma, WA 98907	20-5416294	501 (c) (3)		11,003	FMV	NSP Equipment	General Support
Young Men's Christian Association of Pueblo Colora 3200 Spaulding Ave Pueblo, CO 81008	84-0404925	501 (c)(3)		8,803	FMV	NSP Equipment	General Support
Youth Golf Of Northwest Arkansas1116 S Walton Blvd 211 Bella Vista, AR 72712	20-3303805	501 (c)(3)		9,903	FMV	NSP Equipment	General Support

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DLN: 93493319019100

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name	of tl	ne o	rgar	nizat	ior
VORLD	GOLF	FO	JNDA	TION	INC

Employer identification number

59-2998925

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments ▼ Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract			
	✓ Independent compensation consultant			
	Form 990 of other organizations Approval by the board or compensation committee			
	, Approval by the bound of compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Νo
ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
ь	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
ь	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Helen S Atter	(ı) (ıı)	216,971 0	110,916 0	11,575 0	45,586 0	27,210 0	412,258 0	
John E Peter	(I) (II)	224,979 0	111,928 0	6,374 0	37,420 0	23,629 0	404,330 0	
Robert J Combs	(I) (II)	226,462 0	205,691 0	12,147 0	44,684 0	22,404	511,388 0	
Joseph L Barrow	(ı) (ıı)	300,713 0	296,854 0	13,260 0	350,186 0	32,439 0	993,452 0	
Stephen F Mona	(I) (II)	258,379 0	96,004 0	24,107 0	0	21,385 0	399,875 0	
Kelly A Martin	(I) (II)	184,151 0	72,674 0	8,185 0	25,628 0	16,867 0	307,505 0	
Brent E Davison	(I) (II)	129,117 0	51,095 0	79,984 0	27,385 0	16,121 0	303,702 0	
Bruce M Lahtı	(I) (II)	132,469 0	54,526 0	10,854 0	32,386 0	23,239 0	253,474 0	
Mary H Altman	(I) (II)	146,313 0	60,440 0	8,345 0	26,359 0	26,923 0	268,380 0	
Joseph A O'Brien	(I) (II)	137,904 0	34,034 0	3,412 0	34,118 0	29,042 0	238,510	
John A Sapora	(I) (II)	118,141 0	29,698 0	626 0	18,761 0	23,302 0	190,528 0	
Mark N Lowry	(I) (II)	117,773 0	28,492 0	953 0	22,009 0	16,932 0	186,159 0	
Jennifer K Weiler	(I) (II)	105,486 0	30,901 0	344 0	14,273 0	23,623 0	174,627 0	
Raul Ramos	(I) (II)	104,545 0	28,842 0	798 0	18,340 0	5,156 0	157,681 0	
	_				•			

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	Return Reference	Explanation
PART I, LINE 1A		Gross-Up payments on moving expenses and car allowance
PART I, LINE 1A		Health or social club dues paid for certain officers Personal use is included in W-2
PART I, LINE 7		THE ORGANIZATION HAS A LONG TERM INCENTIVE PLAN THAT IS BASED ON GROWING PROGRAM SERVICES AND EXPANDING THE DONOR BASE
PART VII, LINE 5		THREE INDIVIDUALS ARE PAID BY PGA TOUR HOLDINGS INC AND SUBS (B I) BASE COMPENSATION (B II) BONUS AND INCENTIVE COMPENSATION (B III) OTHER REPORTABLE COMPENSATION (C) RETIREMENT/OTHER DEFERRED COMPENSATION (D) NON TAXABLE BENEFITS NAME (B I) (B II) (B III) (C) (D) HELEN S ATTER 216,971 110,916 11,575 45,586 27,210 JOHN E PETER 224,979 111,928 6,374 37,420 23,629 ROBERT J COMBS 226,462 205,691 12,147 44,684 22,404

Schedule J (Form 990) 2009

DLN: 93493319019100

OMB No 1545-0047

Open to Public

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

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

Inspection

	the organization OLF FOUNDATION INC		Employer identification number					
						59-2998925		
Part I	Excess Benefit Transa Complete if the organization						ne 40b	
1	(a) Name of disquali	fied person		(b) Desc	ription of tra	nsaction	(c) Co Yes	rrected No
	er the amount of tax imposed tion 4958	=	managers or	disqualified pers	ons during th	e year under		
	er the amount of tax, If any, on		• • • bursed by th	e organization .		· · • • <u> </u>		
Part II						-		
	Complete if the organizati		on Form 990), Part IV, line 26	, or Form 990	0-EZ, Part V, line 38a (f)	1	
(a) Name	e of interested person and O		Original pal amount	(d)Balance due	(e) In default?	Approved by board or committee?	(g) Writte agreemer	
	ר	o From			Yes No	Yes No	Yes	No
			. .		I	1	I	
「otal . Part III								
	Complete if the organiz			<u>rm 990, Part IV</u> een interested per	•			
(a	a) Name of interested person	(D) Relati	and the or		(c)	Amount of grant or typ	pe of assis	tance
Part IV	Business Transaction	ns Involving In	terested	Persons.				
	Complete if the organiz			rm 990, Part IV	', line 28a,	28b, or 28c.		
		(b) Relatio between inte		(c) A mount of			organ	harıng o ızatıon's
(a)	Name of interested person	person an	d the	transaction	(d) De:	scription of transaction	on reve	enues?
Norld Gol	f A s s o c ı a t e s	organiza MUTUAL OFF		75.0	OO PROMO	ΓΙΟ NAL EXPENSE	Yes	No No
				, 5,0	23			

World Golf Associates

MUTUAL OFFICERS

114,000 SHARED EMPLOYEE INCOME

Νo

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization WORLD GOLF FOUNDATION INC **Employer identification number**

					59-2998925			
Pa	rt I Types of Property			1	T			
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	(d Method of d reven	etermı	nıng	
1	Art—Works of art	аррисавіс		<u> </u>				
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	2	309,767	FMV			
10	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles	Х	11	448,985	APPRAISED VALU	E		
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other ► (×	1	9,950	EMM			
ACC	PROMOTIONS)		1	9,950	FIM V			
26	MEDIA Other ► (SPOTS)	×	2	125,800	IFM V			
	GOLF			===,===				
27	Other ► (TICKETS)	X	1	54,725	FMV			
	PUBLIC							
	SERVICE		_	12 101 205	EMAY.			
28	Other ► (ANNOUNCEMENTS)	X	2	· · · · ·	I I			
29	Number of Forms 8283 received for which the organization compl				29			1
	p.				•		Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year							
	for exempt purposes for the enti					30a		No
ь	If "Yes," describe the arrangeme					304		
31	Does the organization have a gif			review of any non-standard	contributions?	31	Yes	
		·		·				
32a	Does the organization hire or us contributions?	e unira part	ies or related organizations	s to solicit, process, or sell	non-cash			1
						32a		No
	If "Yes," describe in Part II		Luna () () () ()	manuscriptor East 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	N			
33	If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is cnecked,			

Part II

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.

Ident if ier	Return Reference	Explanat ion
SCHEDULE M PART I COLUMN (B)		THE ORGANIZATION IS REPORTING IN COLUMN (B) THE NUMBER OF CONTRIBUTIONS RECEIVED

Schedule M (Form 990) 2009

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DLN: 93493319019100

OMB No 1545-0047

2009

SCHEDULE 0 (Form 990)

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990.

Supplemental Information to Form 990

Open to Public Inspection

Name of the organization WORLD GOLF FOUNDATION INC **Employer identification number**

59-2998925

ldentifier	Return Reference	Explanation		
PART VI, LINE 7A		UNDER THE BYLAWS, THE SEVEN REPRESENTATIVE DIRECTORS ARE NAMED BY TITLE AND MUST BE ELECTED AS DIRECTOR BY VIRTUE OF THEIR OFFICIAL CAPACITY IN EACH OF THE FOLLOWING SEVEN MAJOR GOLF ORGANIZATIONS - THE PGA TOUR, UNITED STATES GOLF ASSOCIATION, PROFESSIONAL GOLF ASSOCIATION OF AMERICA, LADIES PROFESSIONAL GOLF ASSOCIATION OF AMERICA, THE MASTERS TOURNAMENT, THE R&A, AND THE PGA EUROPEAN TOUR AS A RESULT, THESE SEVEN GOLF ORGANIZATIONS HAVE LIMITED DISCRETION TO ELECT SEVEN OF THE EIGHT DIRECTORS UNDER THE BYLAWS, THE EIGHTH DIRECTOR IS ELECTED BY THE EXISTING DIRECTORS AND IS NOT SELECTED BY ANY OTHER PERSONS OR ORGANIZATIONS IN 2009 THE EIGHTH DIRECTOR WAS AN OPEN POSITION		
PART VI, LINE 11A		THE 990 RETURN WAS REVIEWED BY THE FOLLOWING OFFICERS AND MANAGEMENT OF THE WORLD GOLF FOUNDATION THE SENIOR DIRECTOR OF LEGAL SERVICES AND THE SENIOR DIRECTOR OF FINANCE THE 990 RETURN AS FILED WITH THE IRS WAS ALSO MAILED TO THE BOARD OF DIRECTORS IN NOVEMBER 2010 PRIOR TO FILING		
PART VI, LINE 12C		THE EMPLOYEE HANDBOOK CONTAINS COMPREHENSIVE CONFLICTS OF INTEREST POLICIES AND REPORTING PROCEDURES THAT GOVERN ALL EMPLOYEES, INCLUDING KEY EMPLOYEES AND OFFICERS WHO ARE ALSO EMPLOYEES EACH EMPLOYEE SIGNS A CERTIFICATION WHEN THEY REVIEW THE CONFLICTS OF INTEREST SECTION OF THE EMPLOYEE HANDBOOK, AND THE EMPLOYEE HANDBOOK IS POSTED AT ALL TIMES ON THE ORGANIZATION'S INTRANET WEB SITE THERE IS NO ANNUAL WRITTEN DISCLOSURE FORM EMPLOYEES ARE REQUIRED TO DISCLOSE ACTUAL OR POTENTIAL CONFLICTS OF INTEREST TO AN OFFICER OR THE DIRECTOR OF HUMAN RESOURCES PROMPTLY AS THEY ARISE MONITORING AND MANAGING ACTUAL OR POTENTIAL CONFLICTS OF INTEREST ON THE BOARD OF DIRECTORS AND AMONG EMPLOYEES IS THE RESPONSIBILITY OF THE CHIEF EXECUTIVE OFFICER, WITH ADVICE AND CONSULTATION FROM OTHER OFFICERS, DIRECTORS, SUPERVISORY STAFF AND THE DIRECTOR OF HUMAN RESOURCES AS STATED IN THE EMPLOYEE HANDBOOK EMPLOYEES AND OFFICERS WHO ARE ALSO EMPLOYEES ARE REQUIRED TO REPORT ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST AND TO TAKE APPROPRIATE ACTION INCLUDING ADEQUATE DISCLOSURE AND NOT PARTICIPATING IN DECISIONS THAT INVOLVE THE CONFLICT OF INTEREST		
PART VI, LINE 15A AND 15B		THE 2009 COMPENSATION OF THE CHIEF EXECUTIVE OFFICER AND THE EXECUTIVE VICE PRESIDENT WAS DECIDED BY THE COMPENSATION COMMITTEE COMPRISED OF INDEPENDENT DIRECTORS BASED ON SEVERAL CRITERIA INCLUDING A WRITTEN REPORT WITH COMPARABILITY DATA FROM THE GOLF INDUSTRY A WRITTEN RECORD WAS MADE OF THE COMMITTEE'S COMPENSATION DECISIONS THE COMPENSATION OF OTHER OFFICERS AND KEY EMPLOYEES WAS DETERMINED BY THE CHIEF EXECUTIVE OFFICER AND THE EXECUTIVE VICE PRESIDENT, WITH ALL SUCH COMPENSATION REFLECTED IN THE BUDGET APPROVED BY THE DIRECTORS		
PART VI, LINE 19		THE ARTICLES OF INCORPORATION ARE AVAILABLE ANYTIME ONLINE FROM THE STATE OF FLORIDA, DIVISION OF CORPORATIONS THE ARTICLES OF INCORPORATION, BY LAWS, AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST THE AUDITIED FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC		

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DLN: 93493319019100

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Part I

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2009

2003

OMB No 1545-0047

Open to Public Inspection

Name of the organization	
WORLD GOLF FOUNDATION INC	

Employer identification number

59-2998925

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity

Primary activity

(c)
Legal domicile (state or foreign country)

(d) Total income (e) End-of-year assets (f) Direct controlling entity

Part II

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity (c) Legal domicile (state or foreign country)

Exempt Code section

Public charity status (if section 501(c)(3))

Direct controlling entity

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV,	, line 34
	because it had one or more related organizations treated as a partnership during the tax year.)	

(a) Name, address, and EIN of related organization **(b)** Primary activity (c)
Legal
domicile
(state or
foreign
country)

(d)
Direct controlling
entity

(e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

(f) Share of total income

(g) Share of end-of-year assets (h)
Disproprtionate
allocations? ar

(i) Code V—UBI amount in box 20 of Schedule K-1 (Forn 1065) (j) General or managing partner?

Yes No

Yes No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
WGV ENTERPRISES INC & SUB ONE WORLD GOLF PLACE ST AUGUSTINE, FL32092 59-3399797	GOLF MANAGEME	FL		C Corp	102,377	29,680	100 000 %

Part V	Transactions With Related Organizations	(Complete if the organization answered "Yes"	on Form 990, Part IV, line 34, 35, or 36.)

	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 D	ouring the tax year, did the orgranization engage in any of the following transactions 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 entity	1a	Yes	
b	Gift, grant, or capital contribution to other organization(s)	1b		No
c	Gıft, grant, or capıtal contribution from other organization(s)	1 c		No
d	Loans or loan guarantees to or for other organization(s)	1d	Yes	
e	Loans or loan guarantees by other organization(s)	1e		No
£	Sale of assets to other organization(s)	1f		No
	2 10 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1g		No
_		1h		No
	Liveriality of disselfs	1i		No
•	Lease of facilities, equipment, of other assets to other organization(s)	<u></u> -		- 110
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 organization(s)	1k		No
ı	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
m	Sharing of facilities, equipment, mailing lists, or other assets	1m		No
n	Sharing of paid employees	1n	Yes	
0	Reimbursement paid to other organization for expenses	10		No
p	Reimbursement paid by other organization for expenses	1 p		No
-		1q	Yes	
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 who must complete this line, including covered relationships and transaction thresholds			
	(b)			

	(a) Name of other organization	Transaction type(a-r)	(c) Amount involved
(1) WORLD GOLF ENTERPRISES		а	1,471
(2) WORLD GOLF ENTERPRISES		a	18,000
(3) WORLD GOLF ENTERPRISES		d	210,398
(4)			

(5)

(6)

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No