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DLN: 93493228013452

=orm **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)

2010

OMB No 1545-0047

Open to Public Inspection

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

calendar year, or tax year beginning 10-01-2010 and ending 09-30-2011

C Name of organization D Employer is

A Fo	r the .	2010 ca	lendar year, or tax year beg	inning 10-01-2010 and ending 09-30-2	011			
B Ch	eck if a	pplicable	C Name of organization Tiger Woods Charity Event Cor	poration		D Emp	loyer	identification number
☐ Add	ress ch	nange	Doing Business As			06-	1554	474
∏ Na	me cha	nge	Doing business As			E Tele	phone	number
Init	ıal retu	m		x if mail is not delivered to street address)	Room/su	ııte (949	9)72	5-3003
☐ Tei	mınate	d	121 Innovation Drive Suite 150					
☐ Am	ended	return	City or town, state or country, Irvine, CA 92617	and ZIP + 4	I	<b>G</b> Gross	s receil	pts \$ 28,045,442
Гар	olication	n pending	IIVINE, CA 92617					
			<b>F</b> Name and address of	principal officer	H(a) Is	s this a group returi	n for affil	liates? Yes No
			GREGORY T MCLAUGH 121 INNOVATION DRI					
			IRVINE, CA 92617	VE 312 130	` `	re all affiliates in		· · · ·
						r "No," attaci Group exemp		t (see instructions)
<b>I</b> Ta	x-exem	npt status	▼ 501(c)(3)	◀ (Insert no )				
J W	ebsite	e:► WW	W TIGERWOODSFOUNDAT	TION ORG				
K For	n of org	ganızatıon	Corporation Trust Association	ciation Other 🕨	<b>L</b> Year	of formation 1	999	M State of legal domicile CA
Pa	rt I	Sum	mary					
Governance	(	OPERAT	ES CHARITABLE EVENTS	ssion or most significant activities TO SUPPORT THE PROGRAMS OF THI SUPPORTED ORGANIZATION	E TIGER WC	ODS FOUN	OATI	ON, INCLUDING
Ë	-							_
<b>≯0</b> €	2	Check th	is box 🖛 if the organizatio	n discontinued its operations or dispose	d of more th	an 25% of its	s net	assets
	3 1	Number	of voting members of the gov	verning body (Part VI, line 1a)			3	2
Activities &	4 1	Number	of independent voting memb	ers of the governing body (Part VI, line 1	lb)		4	1
Ē	5	Total nur	mber of individuals employed	d ın calendar year 2010 (Part V , lıne 2a)			5	49
្ន	l		•	e if necessary)			6	2,100
				m Part VIII, column (C), line 12			7a	0
	Ь	Net unrel	lated business taxable incoi	me from Form 990-T, line 34	1		7b	0
	_					Prior Year	622	Current Year
ā	8	8 Contributions and grants (Part VIII, line 1h)					,633	1,507,390
Revenue				umn (A), lines 3, 4, and 7d)		33,735,789 36,011		26,523,148
委	10 11		ment income (Part VIII, col revenue (Part VIII, column	•	30,	011	8,724 6,180	
	12		·	n 11 (must equal Part VIII, column (A),	line			0,100
				<u> </u>		35,163,		28,045,442
	13			Part IX, column (A), lines 1-3)		5,443,	-	5,869,185
	14			art IX, column (A), line 4)			0	0
8	15	5-10)		oloyee benefits (Part IX, column (A), line	s	1,961,	,533	1,969,386
Expenses	16a	Profes	sional fundraising fees (Part	IX, column (A), line 11e)			0	0
Ě	ь	Total fur	ndraising expenses (Part IX, colum	ın (D), line 25) ▶495,452				
ш	17			A), lines 11a-11d, 11f-24f)	· .	26,725,	,262	24,554,683
	18	Total e	expenses Add lines 13-17	(must equal Part IX, column (A), line 25	)	34,130,	,342	32,393,254
	19	Revenu	ue less expenses Subtract	line 18 from line 12		1,033,	091	-4,347,812
Net Assets or Fund Bafances					Begir	nning of Curre Year	ent	End of Year
See a	20	Totala	ssets (Part X, line 16) .			9,885,	217	8,527,679
A AS	21					5,331,		8,321,860
žĒ	22			ract line 21 from line 20		4,553,		205,819
Pai	t II		ature Block					
Unde know	r penal	ties of pe	erjury, I declare that I have ex	amined this return, including accompanying lete. Declaration of preparer (other than off				
Sigr	<b>)</b>	Signa	ture of officer			Date		
Her		GREG	GORY T MCLAUGHLIN PRESIDENT/S	SECRETARY/CEO				
			or print name and title					
		Print/Type preparer's		Preparer's signature	Date	Check if se employed	elf-	PTIN
Paid			ne KPMG LLP	_1	1	3	<u> </u>	Firm's EIN
Prep		Fırm's add	ress • 355 S Grand Ave Suite 200	00				Phone no • (213) 972-
Use	Only		Los Angeles, CA 90071					Phone no <b>F</b> (213) 972-
May	he IR	S discus		er shown above? (see instructions) .				

Par	t III	Statement of F Check if Schedule			lishments uestion in this Part II	ı	
1	Briefl	y describe the orgai	nızatıon's mıssıon				
OFT	HE TIC		DATION, INC , A	PUBLICLY SU			, PROGRAMS, AND GOALS ALIFIED UNDER SECTION
	Did th	o organization undo	rtako any signific	ant program co	arvices during the year	r which were not listed on	
2					· · · · · ·		┌ Yes ┌ No
	If "Ye	s," describe these n	ew services on Sc	hedule O			
3		ie organization ceas ces?				onducts, any program	┌ Yes ┌ No
	If "Ye	s," describe these c	hanges on Sched	ule O			
4	Section	on 501(c)(3) and 50	1(c)(4) organizat	ions and secti		e largest program services bare required to report the an service reported	
4a	(Code	e Schedule O	) (Expenses \$	31,794,582	including grants of \$	5,869,185 ) (Revenue \$	26,523,148 )
4b	(Code	2	) (Expenses \$		including grants of \$	) (Revenue \$	)
4c	(Code	2	) (Expenses \$		including grants of \$	) (Revenue \$	)
			(D. 1				
4d		er program services enses \$	•	edule O ) udıng grants o	f\$	) (Revenue \$	)
4e	Tota	l program service ex	(penses►\$	31,794,58	2		

Part TV	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 (see instruction)? $^{f 2}$	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	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
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 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.	7		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		No
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 quasiendowments? If "Yes," complete Schedule D, Part $V^{\bullet}$	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a		No
b	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.	11b		No
c	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.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
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
b	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? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	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, Parts III and IV $\cdot$	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 (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
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
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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 $\blacksquare$	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		Νo
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 lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	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			
		28a		No
	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 (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
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)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes Vo			
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?	20	Yes	

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

GIL	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	<b>1a</b> 68			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
c				
	gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> Statements filed for the calendar year ending with or within the year covered by this			
	return			
Ь	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 (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		Νo
<b>b</b> :	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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	4a		Νo
	If "Yes," enter the name of the foreign country ►			
	· · · · · · · · · · · · · · · · · · ·			
	$ extit{Was}$ the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Old any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c :	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	_		
		5c		B.1
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the properties organization solicit any contributions that were not tax deductible?	6a		Νo
b :	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	_		
	Old 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		Νo
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	ile Form 8282?	7c		Νo
d .	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
(	contract?	7e		Νo
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	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 consisted as a sponsoring organization, have excess consistency or a sponsoring organization, and the sponsoring organization are sponsoring organization.	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			
a :	Initiation fees and capital contributions included on Part VIII, line 12 <b>10a</b>			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	acilities			
	Section 501(c)(12) organizations. Enter			
	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 )			
		12a		
	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	124		
	year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	s the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
,	13c			
	Old the organization receive any payments for indoor tanning services during the tax year?	14a		No
b :	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

**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.

							_
Chack if Schadula O	contains a response to any question	a in thic Dart VI					
CHECK II SCHEUUIE O	CUIICAIIIS A LESDUIISE LU AIIV UUESLIU	I III LIIIS FAIL VI .			-	-	

_Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
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		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant 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		No
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	
ь	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		N o
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this 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	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	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 15a or 15b, 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
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its			
_	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure	_		
	List the States with which a copy of this Form 990 is required to be filed▶CA			

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization FGREGORY T MCLAUGHLIN

121 INNOVATION DRIVE SUITE 150

IRVINE, CA 92617 (949) 725-3003

## 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

- 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, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours	Posi t	tion that a			II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) CHRIS HUBMAN DIRECTOR	1 0	Х						0	0	0
(2) GREGORY T MCLAUGHLIN PRESIDENT/SECRETARY/CEO	40 0	Х		х				419,037	113,420	45,441
(3) LINDSAY MCCULLOUGH ASSISTANT SECRETARY	40 0			х				72,191	0	10,176
(4) JIN C THATCHER TREASURER	1 0			х				0	144,771	21,788
(5) EMILY C ANDERSON-TAYLOR VP OF COMMUNICATIONS & MKTG	40 0					х		159,314	0	30,891
(6) MICHELLE A BEMIS VP OF EVENTS & BUSINESS DEV	40 0					Х		169,901	0	16,266
(7) DANIEL F CALLAHAN CHAMPIONSHIP DIRECTOR	40 0					х		203,994	0	33,388

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

(A) Name and Title	A verage hours	tion (			II		Reportabl compensat from the	ion	Reportable compensatior from related		Estim. Mount o	ated of other	
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization 2/1099-MI	(W-	organizations (W- 2/1099- MISC)	0	compen from rganizat relat organiza	the ion and ed
											_		
											_		
											_		
											+		
											+		
											+		
											+		
1b Sub-Total						· ·	-				_		
d Total (add lines 1b and 1c) .	<u> </u>					-	<b>-</b>	1,024	437	258,19	1		157,950
2 Total number of individuals (incli \$100,000 in reportable compens	udıng but not lın	nıted to	thos	e lıs			) who	received moi	e tha	n			· .
												Yes	No
3 Did the organization list any form on line 1a? If "Yes," complete Sch	•			ee, k • •	ey e	mploy •	ee,o •	or highest com • • •	pensa •	ated employee	3		No
4 For any individual listed on line 1 organization and related organization													
<ul><li>individual</li><li>5 Did any person listed on line 1a</li></ul>	receive or accri	e comi	• oensa	• atıon	fro	· · manv	• unrel	· · · · · lated organiza	• tıon o	r individual for	4	Yes	
services rendered to the organiz									•	•	5		No
Section B. Independent Con	tractors												
1 Complete this table for your five \$100,000 of compensation from			ındep	ende	ent	contra	ctors	that received	l more	than			
Nan	(A) ne and business ad	dress							Descr	(B) ption of services		(C Compe	
HDO PRODUCTIONS 11910 PARKLAWN DRIVE ROCKVILLE, MD 20852								TENT	RENTA	_S & SETUP			808,528
2 Total number of independent conti	ractors (ıncludıı	ng but r	ot lir	nıted	l to	those	liste	d above) who i	eceiv	ed more than			

Form 9		<u> </u>				Pag	ge <b>9</b>
Pans	<b>/</b>	Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns	1,507,390	1,507,390			
Program Service Revenue		All other program service revenue  Total. Add lines 2a-2f	Business Code 900099	26,523,148 26,523,148	26,523,148		
	4 5 6a b	Investment income (including dividends, interest and other similar amounts)	(п) Personal	8,724 0 0			8,724
da	7a b c d	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss)  Net gain or (loss)  Gross income from fundraising events	(II) O ther	0			
Other Revenue	c 9a	(not including  \$ of contributions reported on line 1c) See Part IV, line 18  a  Less direct expenses b  Net income or (loss) from fundraising events   Gross income from gaming activities See Part IV, line 19 . a		0			
	c 10a b	Less direct expenses		0			
	b c d	All other revenue	Business Code 900099	6,180			6,180
		Total. Add lines 11a-11d		6,180 28,045,442	26,523,148	0 orm <b>990</b> (20	

	990 (2010)				Page <b>10</b>
Par	t IX Statement of Functional Expenses				
Δ	Section 501(c)(3) and 501(c)(4) organizations mus Il other organizations must complete column (A) but are not required to c			(D)	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	5,869,185			ехрепяез
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	, ,	, ,		
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	401,134	284,805	20,057	96,272
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	1,266,866	938,109	56,682	272,075
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	60,796	43,165	3,040	14,591
9	Other employee benefits	137,160	97,384	6,858	32,918
10	Payroll taxes	103,430	77,650	<del>                                     </del>	21,335
а	Fees for services (non-employees) Management	0			· ·
b	Legal	1,750	1,242	88	420
c	Accounting	65,505	51,380	2,435	11,690
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			-
g	Other	169,530	167,944	273	1,313
12	Advertising and promotion	600,028	600,028	<del>                                     </del>	0
13	Office expenses	188,137	187,098	<del>                                     </del>	860
14	Information technology	, 0	,		
15	Royalties	0			
16	Occupancy	253,840	216,936	6,363	30,541
17	Travel	167,713	167,483	<del>                                     </del>	190
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	257,100		
19	Conferences, conventions, and meetings	2,687	2,340	60	287
20	Interest	0	,		
21	Payments to affiliates	0			_
22	Depreciation, depletion, and amortization	0			
23	Insurance	60,601	44,941	2,700	12,960
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	,	,	·	· ·
а	PROG EXP BENEFIT CONCERTS	746,273	746,273	0	0
ь	PROG EXP GOLF TOURNAMENTS	22,298,619	22,298,619	0	0
С					
d					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	32,393,254	31,794,582	103,220	495,452
26	Joint costs. Check here ► ☐ If following				·
l	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a				
	combined educational campaign and fundraising solicitation				000 (2010)

	rt X	Balance Sheet			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	213,785	1	3,973,812
	2	Savings and temporary cash investments	9,288,165	2	4,021,181
:	3	Pledges and grants receivable, net	95,364	3	60,002
	4	Accounts receivable, net		4	
!	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees $$ Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employers, and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions)			
쭕		Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
<b>-</b> 4	8	Inventories for sale or use		8	4,215
	9	Prepaid expenses and deferred charges	287,903	9	463,328
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	_
	15	Other assets See Part IV, line 11	0	15	5,141
	16	Total assets. Add lines 1 through 15 (must equal line 34)	9,885,217	16	8,527,679
	17	Accounts payable and accrued expenses .	164,136	17	873,537
	18	Grants payable		18	750,000
	19	Deferred revenue	5,160,235	19	6,692,848
	20	Tax-exempt bond liabilities		20	
မ	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
盃	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
띕		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	7,215	25	5,475
	26	Total liabilities. Add lines 17 through 25	5,331,586	26	8,321,860
Balances		Organizations that follow SFAS 117, check here ► 🔽 and complete lines 27 through 29, and lines 33 and 34.			
gu	27	Unrestricted net assets	4,553,631	27	205,819
. 중 :	28	Temporarily restricted net assets		28	_
물네	29	Permanently restricted net assets		29	
r Fund		Organizations that do not follow SFAS 117, check here ► and complete lines 30 through 34.			
S or	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	4,553,631	33	205,819
<b>Z</b>  ;	34	Total liabilities and net assets/fund balances	9,885,217	34	8,527,679

Pal	Check if Schedule O contains a response to any question in this Part XI			- [	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		28,0	045,44
2	Total expenses (must equal Part IX, column (A), line 25)	2			393,25
3	Revenue less expenses Subtract line 2 from line 1	3		-4,3	347,81
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,5	553,63
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		2	205,81
Par	TXII Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII		•	୮	
				Yes	No
1	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 is on a separate basis, consolidated basis, or both	sued			
	Separate basis Consolidated basis Both consolidated and separated 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 re	equired	3b		

**Employer identification number** 

#### o no modelo

Provide the following information about the supported organization(s)

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

h

#### **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.

2010

Open to Public
Inspection

Tiger Woods Charity Event Corporation 06-1554474 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is  $\,$  (For lines 1 through 11, check only one box )A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II ) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II ) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h **▽** Type II Type I b c Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) Νo (ii) a family member of a person described in (i) above? 11g(ii) Νo (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Νo

(i) Name of supported organization	<b>(ii)</b> EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi)  Is the organization in col (i) organized in the US?		(vii) A mount of support	
			instructions))	Yes	No	Yes	No	Yes	No	]
(A) TIGER WOODS FOUNDATION INC	061468499	07	Yes						32,393,254	
							-			
Total									32,393,254	

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

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

<u> </u>	ection A. Public Support		and to quanty t				
	endar year (or fiscal year beginning						
Care	in)	<b>(a)</b> 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	<b>(d)</b> 2009	<b>(e)</b> 2010	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
_	behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public Support. Subtract line 5 from						
Ū	line 4						
S	ection B. Total Support		<u> </u>	<b>I</b> I.			
	endar year (or fiscal year beginning						
	ın) <b>&gt;</b>	<b>(a)</b> 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	<b>(d)</b> 2009	<b>(e)</b> 2010	<b>(f)</b> Total
7	A mounts from line 4						
8	Gross income from interest,						
Ū	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV )						
11	Total support (Add lines 7						
	through 10)						
12	Gross receipts from related activiti	es, etc (See inst	ructions )			12	
13	First Five Years If the Form 990 is t	for the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	501(c)(3) organı	
	check this box and <b>stop here</b>						<b>►</b>
	-tiC Ct-ti	L'a Carana at B					
<u> </u>	ection C. Computation of Pub Public Support Percentage for 2010			11 column (f))			
	· ·		•	II Column (1))		14	
15	Public Support Percentage for 2009	Schedule A, Pa	rt II, line 14			15	
16a	<b>33 1/3% support test—2010.</b> If the				line 14 is 33 1/3%	or more, check	
_	and <b>stop here.</b> The organization qua						<b>▶</b> □
b	<b>33 1/3% support test—2009.</b> If the				5a, and line 15 is 3	33 1/3% or more,	- <del>-</del>
	box and <b>stop here.</b> The organization				45.46		<b>►</b>
1/a	10%-facts-and-circumstances test-						
	is 10% or more, and if the organization made						rt a d
	in Part IV how the organization mee	ts the "racts and	circumstances"	test ine organiz	ration qualifies as	a publicly suppo	
L	organization	_2000 If+ba a	anization did not	chack a hay an l	no 12 165 166 -	r 17a and line	<b>►</b> □
D	<b>10%-facts-and-circumstances test-</b> 15 is 10% or more, and if the organ						
	Explain in Part IV how the organization						V
	supported organization	aon meets the 10	acts and circuilis	tances test file	z organizacion qual	mes as a publici	y ▶[¯
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b, check this	box and see	- 1
	instructions	on ala not check	a box on fine 15	, 100, 100, 1700	I by check tills	SON GING SCC	<b>▶</b> □

organization

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total in) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f)) 15 16 Public support percentage from 2009 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f)) 17 **17** Investment income percentage from 2009 Schedule A, Part III, line 17 18 18 19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported

33 1/3% support tests-2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

**▶**□

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

#### **Explanation**

THE ORGANIZATION PROVIDED THE FOLLOWING SUPPORT TO ITS SUPPORTED ORGANIZATION, THE TIGER WOODS FOUNDATION, BY SUPPORTING THE TIGER WOODS LEARNING CENTER AND PROVIDING SCHOLARSHIP GRANTS TOTALING \$5,869,185 and by providing \$26,524,069 FOR THE OPERATION AND SPONSORSHIP OF THE AT&T NATIONAL CHARITY GOLF TOURNAMENT, CHEVRON WORLD CHALLENGE and Tiger Jam THESE EVENTS WERE HELD TO RAISE FUNDS ON BEHALF OF THE FOUNDATION'S PROGRAMS

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DLN: 93493228013452

OMB No 1545-0047

Open to Public Inspection

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

**Supplemental Financial Statements** ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

	me of the organization er Woods Chanty Event Corporation		Emple	oyer identification number
rige	er woods chanty event corporation		06-1	554474
Pa	organizations Maintaining Donor Acorganization answered "Yes" to Form 99			
		(a) Donor advised funds	(1	b) Funds and other accounts
L	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
ŀ	Aggregate value at end of year			
5	Did the organization inform all donors and donor advifunds are the organization's property, subject to the	_	or advis	Yes No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit	efit of the donor or donor advisor, or for ar	ny other	purpose Yes No
Pa	rt III Conservation Easements. Complete	ıf the organızatıon answered "Yes" t	<u>o Form</u>	990, Part IV, line 7.
L 2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat.  Preservation of open space  Complete lines 2a-2d if the organization held a qualice easement on the last day of the tax year.	on or pleasure)	certified	historic structure
				Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
C	Number of conservation easements on a certified his	toric structure included in (a)	2c	
d	Number of conservation easements included in (c) ac	equired after 8/17/06	2d	
3	Number of conservation easements modified, transfe	rred, released, extinguished, or terminate	d by the	e organization during
	the taxable year 🗠			
ı	Number of states where property subject to conserva	ation easement is located 🕨		
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	dling of	violations, and <b>Yes No</b>
5	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	nents du	ring the year ▶
7	A mount of expenses incurred in monitoring, inspecting	ng, and enforcing conservation easements	s during	the year ► \$
3	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$ ?	(d) above satisfy the requirements of sec	tion	┌ Yes ┌ No
•	In Part XIV, describe how the organization reports contained balance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	he footnote to the organization's financial		
ar	Complete if the organization answered "		or Oth	er Similar Assets.
la	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch in fur	
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	oublic exhibition, education, or research ii		•
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$
	(ii) Assets included in Form 990, Part X			<b>▶</b> \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA		or financ	'

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

100	Organizations Maintaining Co	llections of Art,	His	tori	cal Tr	easur	es, or C	the	<u>r Similar A</u>	ssets (c	ontınued)
		r records, check any	ofth	ne foll	owing t	hat are	a significa	ant u	se of its colle	ction	
F	Public exhibition		d	$\vdash$	Loan	or excha	nge prog	rams			
	Scholarly research		e	$\Gamma$	Other						
┌ F	Preservation for future generations										
		ollections and explai	n hov	v the	furthe	r the or	ganızatıor	ı's ex	empt purpose	ın	
									nılar	┌ Yes	┌ No
t IV							answere	d "Y	es" to Form	990,	
		ian or other interme	diary	tor c	ontribu	tions or	other ass	etsı	not	┌ Yes	┌ No
		/ and complete the f	ollow	ng ta	ıble						
		·		_					А	mount	
Begii	nnıng balance							1c			
A ddı	tions during the year						Γ	1d			
Dıstı	ributions during the year						Γ	1e			
Endii	ng balance						Ī	1f			
Did tl	he organization include an amount on Fo	orm 990, Part X, line	21?				_			┌ Yes	┌ No
If "Y∈	es," explain the arrangement in Part XIV	,									
t V	Endowment Funds. Complete										
_		(a)Current Year	(b)	Prior \	'ear	(c)Two	Years Back	(d)	Three Years Back	<b>(e)</b> Four \	ears Back
								+			
								+			
	_							+			
Othe	r expenditures for facilities										
Provi	lde the estimated percentage of the yea	r end balance held a	s							•	
Board	d designated or guasi-endowment 🕨										
	-										
Term	endowment -										
		ssion of the organiza	ition t	that a	re held	d and ad	mınıstere	d for	the		
									2-		No
• •	•			•		• •		•	<b>—</b>		+
` '	5		• I on S	ched	ule R?			٠.			1
Desc	ribe in Part XIV the intended uses of th	e organızatıon's end	owme	ent fu	nds				<u> </u>	l	
t VI	Investments—Land, Buildings	s, and Equipmer	nt. S	ee F	orm 9	90, Par	t X, lıne	10.	1		
	Description of investment								1 ' '		Book value
and											
Buildir	ngs										
easel	hold improvements										
quipr	ment		-								
	Using items  Proving asset IV  Is the inclusion of the and	Using the organization's accession and other items (check all that apply)  Public exhibition  Scholarly research  Preservation for future generations  Provide a description of the organization's corpart XIV  During the year, did the organization solicit of assets to be sold to raise funds rather than the sasets to be sold to raise funds rather than the tive of the part IV, line 9, or reported an amount on Form 990, Part X?  If "Yes," explain the arrangement in Part XIV  Beginning balance  Additions during the year  Ending balance  Did the organization include an amount on Form Yes," explain the arrangement in Part XIV  TV Endowment Funds. Complete in the part XIV Endowment Funds. Complete in the Arrangement in Part XIV  Administrative expenses  End of year balance  Provide the estimated percentage of the year and programs  Administrative expenses  End of year balance  Provide the estimated percentage of the year and designated or quasi-endowment Permanent endowment  Term endowment  Are there endowment funds not in the posses organization by  (i) unrelated organizations  If "Yes" to 3a(ii), are the related organization Describe in Part XIV the intended uses of the VI Investments—Land, Buildings  Description of investment	Using the organization's accession and other records, check any items (check all that apply)  Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain Part XIV  During the year, did the organization solicit or receive donations assets to be sold to raise funds rather than to be maintained as tiv Escrow and Custodial Arrangements. Complet Part IV, line 9, or reported an amount on Form 99  Is the organization an agent, trustee, custodian or other interme included on Form 990, Part X?  If "Yes," explain the arrangement in Part XIV and complete the following the year Distributions during the year Distributions during the year Ending balance Did the organization include an amount on Form 990, Part X, line 1f "Yes," explain the arrangement in Part XIV  **V** Endowment Funds. Complete if the organization in the organization in the part XIV series of the organization investment earnings or losses  Grants or scholarships  Other expenditures for facilities and programs  Administrative expenses End of year balance  Provide the estimated percentage of the year end balance held a Board designated or quasi-endowment  Permanent endowment  Permanent endowment that not in the possession of the organization organization by  (i) unrelated organizations  If "Yes" to 3a(ii), are the related organizations listed as required organization by reserved in Part XIV the intended uses of the organization's endet VI Investments—Land, Buildings, and Equipment  Description of investment	Using the organization's accession and other records, check any of thems (check all that apply)  Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain however the second of the organization solicit or receive donations of an assets to be sold to raise funds rather than to be maintained as part of Part XIV  During the year, did the organization solicit or receive donations of an assets to be sold to raise funds rather than to be maintained as part of Part IV, line 9, or reported an amount on Form 990, Part XIV, line 9, or reported an amount on Form 990, Part XIV, line 9, or reported an amount on Form 990, Part XIV and complete the follows  Beginning balance Additions during the year Distributions during the year Distributions during the year Ending balance Did the organization include an amount on Form 990, Part X, line 21?  If "Yes," explain the arrangement in Part XIV  **V Endowment Funds.** Complete if the organization ans leading of year balance Contributions  Beginning of year balance Contributions  Investment earnings or losses Grants or scholarships Other expenditures for facilities and programs Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the year end balance held as Board designated or quasi-endowment Permanent endowment Permanent endowment  Are there endowment funds not in the possession of the organization organization by  (i) unrelated organizations If "Yes" to 3a(ii), are the related organizations listed as required on S Describe in Part XIV the intended uses of the organization's endowment  Investments—Land, Buildings, and Equipment. So Describe in Part XIV the intended uses of the organization's endowment  Investments—Land, Buildings, and Equipment.	Using the organization's accession and other records, check any of the folitiems (check all that apply)  Public exhibition  Scholarly research  Preservation for future generations  Provide a description of the organization's collections and explain how they Part XIV  During the year, did the organization solicit or receive donations of art, his assets to be sold to raise funds rather than to be maintained as part of the Part IV, line 9, or reported an amount on Form 990, Part X. Is the organization an agent, trustee, custodian or other intermediary for concluded on Form 990, Part X?  If "Yes," explain the arrangement in Part XIV and complete the following table to organization include an amount on Form 990, Part X, line 21?  If "Yes," explain the arrangement in Part XIV  To Endowment Funds. Complete if the organization answere (a)Current Year  Beginning of year balance  Contributions  Investment earnings or losses  Grants or scholarships  Other expenditures for facilities and programs  Administrative expenses  End of year balance  Provide the estimated percentage of the year end balance held as Board designated or quasi-endowment  Permanent endowment  Permanent endowment  Permanent endowment  Permanent endowment  Term endowment  Permanent endowment  Premendowment  Premendowent  Premendownent  Premendowne	Using the organization's accession and other records, check any of the following titems (check all that apply)  Public exhibition  Scholarly research  Preservation for future generations  Provide a description of the organization's collections and explain how they further Part XIV  During the year, did the organization solicit or receive donations of art, historical assets to be sold to raise funds rather than to be maintained as part of the organizastion to be sold to raise funds rather than to be maintained as part of the organizastion to be sold to raise funds rather than to be maintained as part of the organization to part IV, line 9, or reported an amount on Form 990, Part X, line 2  Is the organization an agent, trustee, custodian or other intermediary for contributional decomplete on the organization and part XIV and complete the following table  Beginning balance  Additions during the year  Distributions during the year  Distributions during the year  Did the organization include an amount on Form 990, Part X, line 21?  If "Yes," explain the arrangement in Part XIV  Findowment Funds. Complete if the organization answered "Yes (a)Current Year (b)Pnor Year  Beginning of year balance (b)Pnor Year (a)Current Year (b)Pnor Year  Beginning of year balance (b)Pnor Year (a)Current Year (b)Pnor Year  Beginning of year balance (b)Pnor Year	Using the organization's accession and other records, check any of the following that are items (check all that apply)  Public exhibition  Scholarly research  Preservation for future generations  Provide a description of the organization's collections and explain how they further the organization for future generations.  Provide a description of the organization solicit or receive donations of art, historical treasure assets to be sold to raise funds rather than to be maintained as part of the organization. Part IV.  Buring the year, did the organization solicit or receive donations of art, historical treasure assets to be sold to raise funds rather than to be maintained as part of the organization. Part IV, line 90, or reported an amount on Form 990, Part X, line 21.  Is the organization an agent, trustee, custodian or other intermediary for contributions or included on Form 990, Part X, line 21.  If "Yes," explain the arrangement in Part XIV and complete the following table.  Beginning balance  If the organization include an amount on Form 990, Part X, line 21?  If "Yes," explain the arrangement in Part XIV  If "Yes," explain the arrangement in Part XIV  V Endowment Funds. Complete if the organization answered "Yes" to Form (a)Current Year (b)Prior Year (c)Two Beginning of year balance.  Contributions	Using the organization's accession and other records, check any of the following that are a signification's (check all that apply)  Public exhibition  Scholarly research  Preservation for future generations  Provide a description of the organization's collections and explain how they further the organization Part XIV  During the year, did the organization solicit or receive donations of art, historical treasures or othe assets to be sold to raise funds rather than to be maintained as part of the organization answere Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  Is the organization an agent, trustee, custodian or other intermediary for contributions or other assincluded on Form 990, Part X?  If "Yes," explain the arrangement in Part XIV and complete the following table  Beginning balance  If the organization include an amount on Form 990, Part X, line 21?  If "Yes," explain the arrangement in Part XIV  Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X, line 21?  If "Yes," explain the arrangement in Part XIV  Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X, line 21?  If "Yes," explain the arrangement in Part XIV  Other expenditures for facilities and programs  Administrative expenses  End of year balance  Did for each provide the estimated percentage of the year end balance held as Board designated or quasi-endowment ▶  Permanent endowment ▶  Permanent endowment Funds not in the possession of the organization that are held and administere organization by  (i) unrelated organizations  If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIV the intended uses of the organization's endowment funds  Buildings.	Using the organization's accession and other records, check any of the following that are a significant uptems (check all that apply)  Public exhibition  Scholarly research  Preservation for future generations  Previde a description of the organization's collections and explain how they further the organization's expart XIV  During the year, did the organization solicit or receive donations of art, historical treasures or other simple systems to be sold to raise funds rather than to be maintained as part of the organization's collection?  ***TV** Excrow and Custodial Arrangements.**Complete if the organization answered "Yeart IV, line 9, or reported an amount on Form 990, Part X, line 21.  Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets included on Form 990, Part X?  If "Yes," explain the arrangement in Part XIV and complete the following table  Beginning balance  If the programization include an amount on Form 990, Part X, line 21?  If "Yes," explain the arrangement in Part XIV  Explain the arrangement in Part	Using the organization's accession and other records, check any of the following that are a significant use of its collections (check all that apply)  Public exhibition  Scholarly research  Preservation for future generations  Preservation for future generations  Preservation for future generations object or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Exercised and Custodial Arrangements. Complete if the organization answered "Yes" to Form Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X.  If "Yes," explain the arrangement in Part XIV and complete the following table  Beginning balance  Additions during the year  If "Yes," explain the arrangement in Part XIV  Form the organization include an amount on Form 990, Part X, line 21?  If "Yes," explain the arrangement in Part XIV  The intermediation include an amount on Form 990, Part X, line 21?  If "Yes," explain the arrangement in Part XIV  The organization include an amount on Form 990, Part X, line 21?  If "Yes," explain the arrangement in Part XIV  The organization include an amount on Form 990, Part X, line 21?  If "Yes," explain the arrangement in Part XIV  The organization include an amount on Form 990, Part X, line 10.  Administrative expenses  Administrative expenses  Administrative expenses  Form of year balance  Provide the estimated percentage of the year end balance held as Board dasignated or quasi-endowment ▶  Ferm endowment ▶  Ferm endowment Form endowment Form 990, Part X, line 10.  Describe in Part XIV the intended uses of the organizations endowment funds  Gi) related organizations  (ii) related organizations  (iii) related organizations  (iii) related organizations  (iv) Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Describe in Part XIV	Using the organization's accession and other records, check any of the following that are a significant use of its collection terms (check all that apply)    Scholarly research

Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)20011 10100	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.
		(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 )		
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	e 15. tion	
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip  Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.	e 15. tion  5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X	5.)	
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip  Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.	e 15. tion  5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes  DUE TO AFFILIATES	5.)  , line 25.  (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	5.)  , line 25.  (b) Amount	

Par	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	28,045,442
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	32,393,254
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-4,347,812
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	
9		9	
10	Total adjustments (net) Add lines 4 - 8	<del>-</del>	-4,347,812
	Excess or (deficit) for the year per financial statements Combine lines 3 and 9 <b>t XII</b> Reconciliation of Revenue per Audited Financial Statements With Revenue p	10	
1	Total revenue, gains, and other support per audited financial Statements With Revenue p	1	28,045,442
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		20,043,442
ے a	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e e	Add lines 2a through 2d	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	28,045,442
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		20,043,442
	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
a b			
_	Other (Describe in Part XIV)	4-	
C E	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	4c 5	29.045.442
5 Dart	Reconciliation of Expenses per Audited Financial Statements With Expenses	_	28,045,442
1	Total expenses and losses per audited financial	pei	32,393,254
-	statements	1	32,333,231
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		
e	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	32,393,254
4	Amounts 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) 4b		
C	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	32,393,254
Par	t XIV Supplemental Information		
	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P t V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete		

additional information

Identifier	Return Reference	Explanation
FIN 48 FOOTNOTE (ASC 740)	,	THE FOUNDATION ADOPTED THE PROVISIONS OF ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC 740, INCOME TAXES, WHICH PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN AND PROVIDES GUIDANCE ON DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, DISCLOSURE, AND TRANSITION MANAGEMENT ASSERTS THAT NO SUCH UNCERTAIN TAX POSITIONS EXIST REQUIRING ACCRUAL OR DISCLOSURE AT SEPTEMBER 30, 2011 OR 2010

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Schedule I (Form 990)

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

OMB No 1545-0047

DLN: 93493228013452

Open to Public

Department of the Treasury

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

Internal Revenue Service   Name of the organization						Employer identif	ication number
Tiger Woods Charity Event Corp	poration					06-1554474	
Part I General Inform	nation on Grants	and Assistance					
<ul> <li>Does the organization mainstrain the selection criteria used</li> <li>Describe in Part IV the organization</li> </ul>	d to award the grants ganızatıon's procedu	or assistance? res for monitoring the us	e of grant funds in the				✓ Yes
Form 990, Part I		o Governments and recipient that receive eded.		. Check this box if n	io one recipient rece	ived more than \$5,0	
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Garrett Williamson Foundation395 Bishop Hollow Rd Newtown Square,PA 19073	23-1433892	501(C)(3)	12,000	0	N/A	N/A	summer program
(2) Marines Fore Scholarship 1706 Weatherstone Drive Paoli,PA 19301	23-3031943	501(C)(3)	11,000	0	N/A	N/A	SCHOLARSHIP
(3) Tiger Woods Foundation 121 Innovation Drive Suite 150 Irvine, CA 92617	06-1468499	501(C)(3)	5,774,583	0	N/A	N/A	YOUTH DEVELOPMENT
(4) World Golf Foundation IncOne World Golf Place St Augustine, FL 320922727	59-2998925	501(C)(3)	50,000	0	N/A	N/A	GOLF EDUCATION

Enter total number of section 501(c)(3) and government organizations . . . . . . .

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, I	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	<b>(c)</b> 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

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS	,	AS A SECTION 509(a)(3) SUPPORTING ORGANIZATION, THE ORGANIZATION OPERATES EXCLUSIVELY FOR THE BENEFIT OF, TO PERFORM THE FUNCTION OF, OR TO CARRY OUT THE PURPOSES OF THE TIGER WOODS FOUNDATION (PROGRAMS SUCH AS LEARNING CENTERS AND SCHOLARSHIPS), WHICH INCLUDE MAKING PAYMENTS DIRECTLY TO THE BENEFICIARY ORGANIZATION, TRANSFERRING AND MONITORING THAT RESTRICTIONS ARE MET BEFORE RELEASE AND EXPENDITURE OF SUCH FUNDS For grants to other organizations, the Foundation does require progress reports on select grants once the grant has been made Also, the Foundation utilizes pregrant procedures and inquiries to ensure the grantee organization meets the requirements for approved programmatic areas of funding

Part I Questions Regarding Compensation

DLN: 93493228013452

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 the organization		Employer ident if	fication number
Tiger Woods Charity Event Corporation			
		06-1554474	

			Yes	Νo
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		
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		
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			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations  Approval by the board or 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 from the organization or a related organization?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-based compensation arrangement?	<b>4</b> c		Νo
	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		Νo
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	5b		No
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
b	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		No
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 in Part III	8		No
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 duplicate copies if additional space is 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		(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
(1) EMILY C ANDERSON-TAYLOR	(ı) (ıı)	138,237 0	20,000 0	1,077 0	6,421 0	24,470 0	190,205 0	0
(2) MICHELLE A BEMIS	(1) (11)	139,131 0	20,000 0	10,770 0	6,797 0	9,469 0	186,167 0	0 0
(3) DANIEL F CALLAHAN	(ı) (ıı)	138,609 0	60,000 0	5,385 0	5,809 0	27,579 0	237,382 0	0 0
(4) JIN C THATCHER	(1) (11)	0 124,579	0 17,500	0 2,692	0 5,839	0 15,949	0 166,559	0
(5) GREGORY T MCLAUGHLIN	(1) (11)	241,654 113,420		27,453 0	9,800 0	35,641 0	464,478 113,420	
(6)								
(7)								
(8)								
(9)								
( 10 )								
( 11 )								
( 12 )								
( 13 )								
( 14 )								
( 15 )								
( 16 )								
	•							-l- 1 (F 000) 2010

#### 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

Identifier	Return Reference	Explanation
Compensation from Related Organizations		The President, SECRETARY and CEO, Gregory T McLaughlin, is compensated through two related 501(c)(3) organizations - Tiger Woods Foundation and Tiger Woods Charity Event Corporation where he devotes 65 hours per week however, in addition to his responsibilities for these two organizations, he also serves as the President, SECRETARY and CEO of Tiger Woods Learning Center Foundation and Tiger Woods Learning Center Foundation-DC, both 501(c)(3) affiliates with 6 hours of service per week Mr McLaughlin's total compensation for his services provided to all four 501(c)(3) affiliated public charities was paid as follows (B)(i) (B)(ii) (C) (D) Tiger Woods Foundation 113,420 NONE NONE NONE NONE Tiger Woods CEC 241,654 149,930 27,453 9,800 35,641 Tiger Woods LC-OC NONE NONE NONE NONE NONE NONE NONE NO

Schedule J (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493228013452

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2010

Open to Public
Inspection

Name of the organization
Tiger Woods Charity Event Corporation

06-1554474

ldentifier	Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	FORM 990, PART III, LINE 4	HOSTED BY TIGER WOODS, THE CHEVRON WORLD CHALLENGE FEATURED AN ELITE 18-MAN FIELD IN A FOUR-DAY TOURNAMENT HELD AT SHERWOOD COUNTRY CLUB IN THOUSAND OAKS, CALIFORNIA THE TOURNAMENT WORKS TO RAISE AWARENESS FOR ITS NOT-FOR-PROFIT PARTNERS INCLUDING THE TIGER WOODS FOUNDATION AND OTHER LOCAL CHARITIES THE TIGER JAM WELCOMED John Mayer and Keth Urban TO THE MANDALAY BAY EVENTS CENTER IN LAS VEGAS THE CONCERT EVENT AND ACCOMPANY ING EVENTS RAISED FUNDS FOR THE COLLEGE-ACCESS PROGRAMS OF THE TIGER WOODS FOUNDATION THE EVENT BEGAN WITH A GOLF OUTING AND EXHIBITION BY TIGER WOODS FOLLOWED BY A GOURMET DINNER, LIVE AND SILENT AUCTIONS AND CONCLUDED WITH THE ARTISTS CONCERT THE AT&T NATIONAL HAD 120 PGA TOUR PROFESSIONALS COMPETING AT Aronimink Country Club in Philadelphia THE EVENT PAID TRIBUTE TO THE US MILITARY AND ALSO RAISED FUNDS FOR THE COLLEGE-ACCESS PROGRAMS OF THE TIGER WOODS FOUNDATION, Tiger Woods Learning Center in PA, and other local charities The Deutsche Bank Championship was a premier PGA TOUR event held over Labor Day weekend at the TPC Boston in Norton, Mass It raised funds for the Tiger Woods Foundation and New England-area charities The event featured the top PGA TOUR golfers as they competed in the PGA TOUR Playoffs for the FedEx Cup first prize

ldentifier	Return Reference	Explanation
MEMBERS OF THE ORGANIZATION	FORM 990, PART VI, LINE 7A	THE ORGANIZATION HAS a sole MEMBER THE MEMBER'S CLASS IS NONVOTING THE MEMBER ELECTS AND DESIGNATES THE BOARD OF GOVERNORS ALL CORPORATE POWERS ARE MANAGED UNDER THE DIRECTION OF THE BOARD OF governors

ldentifier	Return Reference	Explanation
PROCESS FOR REVIEW OF FORM 990	FORM 990, PART VI, LINE 11	The Board of governors has delegated the review of the Form 990 to the Audit Committee. The organization's Executive Staff works closely with the outside accounting firm it engages to review the return, and the final draft of Form 990 is also reviewed by the treasurer/CFO prior to providing the draft to the Audit Committee. In addition to consulting with the treasurer/CFO and Executive Staff, the Audit Committee also meets with the accounting firm hired to prepare the Form 990. Subsequent to its review, the Audit Committee reports back to the Board regarding its oversight of the Form 990 and the final draft is provided to the entire Board before the return is filed.

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

ldentifier	Return Reference	Explanation
COMPENSATION DETERMINATION PROCESS	FORM 990, PART VI, LINE 15	The Board appoints a COMPENSATION Committee, none of which have a conflict of interest with respect to the compensation arrangement, to be accountable for setting reasonable compensation packages for each officer or key employee, including the CEO. The COMPENSATION Committee develops, consistent with the organization's philosophy and principles, the annual performance goals and criteria to be used in determining merit increases and variable compensation criteria for officers and key employees. The COMPENSATION Committee also hires a qualified independent compensation and benefits specialist (independent expert) to review, analyze and provide benchmarking data for the total compensation and benefits packages of officers and key employees. Appropriate comparability data is obtained from the independent experts, (i.e., total economic benefits paid by similarly situated organizations, both taxable and tax-exempt) for similar job responsibilities. ON NOVEMBER 29, 2010 THE COMPENSATION COMMITTEE VOTED TO APPROVE THE CEO COMPENSATION FOR THE 2011 CALENDAR YEAR. The Committee's written records include the (1) terms of the arrangement with the disqualified person (including the date the arrangement was approved), and (2) a description of the comparable data relied on by the Committee. Key deliberations of the Committee, including (A) The terms of the transaction that was approved and the date it was approved, (B) The members of the authorized body who were present during debate on the transaction that was approved and those who voted on it, (C) The comparability data obtained and relied upon by the authorized body and how the data was obtained, and (D) Any actions taken with respect to consideration of the transaction by anyone who is otherwise a member of the authorized body but who had a conflict of interest with respect to the transaction are also documented in minutes, which are approved at the next Committee meeting

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

ldentifier	Return Reference	Explanation
Audit of Financial Statements by Independent Accountant		The Tiger Woods Charity Event Corporation's financial statements were included in the consolidated audited financial statements of The Tiger Woods Foundation Inc., and Affiliates The consolidated audited financial statements were audited by KPMG, an independent accounting firm, and were prepared according to GAAP

ldentifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME GREGORY T MCLAUGHLIN TITLE PRESIDENT/SECRETARY/CEO HOURS 31

ldentifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME LINDSAY MCCULLOUGH TITLE ASSISTANT SECRETARY HOURS 27

ldentifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME JIN C THATCHER TITLE TREASURER HOURS 42

DLN: 93493228013452

2010

OMB No 1545-0047

Open to Public Inspection

# SCHEDULE R (Form 990)

#### **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.

Department of the Treasury Internal Revenue Service

Name of the organization
Tiger Woods Charity Event Corporation

Employer identification number

06-1554474 Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.) (d) (c) (e) Name, address, and EIN of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity 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.) (**g**) Section 512(b)(13) Direct controlling Name, address, and EIN of related organization Legal domicile (state Exempt Code section Public charity status Primary activity controlled or foreign country) (if section 501(c)(3)) entity organization Yes (1) TIGER WOODS FOUNDATION INC 121 INNOVATION DR STE 150 NA 7 YOUTH PROGRAM CA 501(C)(3) IRVINE, CA 92617 06-1468499 (2) TIGER WOODS LEARNING CENTER FOUNDATION 1 TIGER WOODS WAY NA **EDUCATION** CA 501(C)(3) 2 ANAHEIM, CA 92801 20-0677815 (3) TIGER WOODS LEARNING CTR FOUNDATION-DC 709 12th street SE EDUCATION DC 501(C)(3) 2 washington, DC 20003 26-1175108

Part III Identifi because	ication of Related to the it had one or mo	<b>ed Org</b> ore relat	<mark>anizations Taxa</mark> ted organizations t	<b>ble as a Partner</b> reated as a partne	<b>ship</b> (Co ership du	omplete if ring the t	the org ax year	ganization ( f.)	answe	ered "\	es" on Fo	rm 990,	Part	IV, lıı	ne 34
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	Share of t	<b>(f)</b> total income		(g) f end-of-year assets	( <b>h</b> Disprop alloca	ortionate	(i) Code V— amount in be Schedule (Form 10	ox 20 of K-1	<b>(j</b> Gene mana parti	ral or aging	<b>(k)</b> Percentage ownership
									Yes	No			Yes	No	
Part IV Identifi	ication of Relat because it had on	ed Orga e or mo	l anizations Taxa pre related organız	ble as a Corpora ations treated as a	tion or a corpora	Trust (Co	I ompleto ust dur	e if the org ing the tax	anıza year	tion ar .)	nswered "Y	es" on	Form	990,	Part IV,
Name, address, an	(a) Id EIN of related organiz	ation	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)		<b>(d</b> Direct cor enti	ntrolling	(e) Type of el (C corp, S or trust	corp,	Share o	<b>(f)</b> f total income	Sha end-o	<b>j)</b> re of f-year sets		<b>(h)</b> Percentage ownership
														+	

Part V Transactions With Related Organizations (Complete if the organization answered "Y	res" on Form 990, Pa	rt IV, line 34, 35, 3	5A, or 36.)												
Note. Complete line 1 if any entity is listed in Parts II, III or IV															
f 1 During the tax year, did the orgranization engage in any of the following transactions with one or more related org	ganızatıons lısted ın Part	s II-IV?													
<ul> <li>a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity</li> <li>b Gift, grant, or capital contribution to other organization(s)</li> <li>c Gift, grant, or capital contribution from other organization(s)</li> </ul>															
										<b>d</b> Loans or loan guarantees to or for other organization(s)			1d		No
										e Loans or loan guarantees by other organization(s)					
f Sale of assets to other organization(s)															
g Purchase of assets from other organization(s)															
h Exchange of assets															
i Lease of facilities, equipment, or other assets to other organization(s)															
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)															
Performance of services or membership or fundraising solicitations by other organization(s)															
m Sharing of facilities, equipment, mailing lists, or other assets															
n Sharing of paid employees															
• Reimbursement paid to other organization for expenses															
<b>p</b> Reimbursement paid by other organization for expenses			<b>1</b> p	Yes											
<b>q</b> Other transfer of cash or property to other organization(s)			<b>1</b> q		No										
r Other 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 relat	ionships and transact	non thresholds												
(a) Name of other organization	<b>(b)</b> Transaction type(a-r)	(c) Amount involved	(d) Method of determing Involved		ount										
(1)															
(2)															
(3)															
(4)															
(5)															
<b>(6)</b>															

#### 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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d Are parti sect 501(d organiz	ners ion :)(3) :ations?	<b>(e)</b> Share of end-of-year assets		r) ortionate tions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	h) eral or laging tner?
			Yes	No		Yes	No		Yes	No
									+	-
							$\vdash$		+	╁
									-	-
									+	-
										t
										1

#### Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
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Schedule R (Form 990) 2010