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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)

OMB No 1545-0047

Department of the Treasury

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

Open to Public Inspection

| _                                      |               | 2012             | <del> </del>   | <del></del>                             |                          | <del></del>             |                |                                       | L                        |                                       |               |
|--|---------------|------------------|--|---|--------------------------|-------------------------|----------------|---------------------------------------|--------------------------|---------------------------------------|---------------|
|  | For the       | 2012 calen       | dar year, or tax year begin  | ning                                    | , 2012,                  | and ending              | 1              |                                       | <u> </u>                 |                                       |               |
| В                                      | Check if a    | pplicable        | С  |   |                          |                         |                | D Employer                            | Identification N         | umber                                 |               |
|  | Addre         | ess change       | CLUBCORP CHARITI   | ES, INC.                                |                          |                         |                | 75-2                                  | 754798                   |                                       |               |
|  | Name          | change           | 3030 LBJ FREEWAY   |   |                          |                         |                | E Telephone                           | number                   |                                       |               |
|  | Initial       | return           | DALLAS, TX 75234   |   |                          |                         |                | 214-1                                 | 243-6191                 |                                       |               |
|  | $\vdash$      | ınated           |  |   |                          |                         |                |                                       | 313 313                  |                                       |               |
|  | H             |                  |  |   |                          |                         |                | <b>C</b> 5                            | . <b>ė</b>               | 704 4                                 | 0.5           |
|  | $\vdash$      | nded return      |  |   |                          | <del></del>             |                | G Gross rece                          |                          | 724,4                                 |               |
|  | Applic        | cation pending   |  | l officer                               |                          | i                       | 1.             | a group return f                      |                          | <u> н</u> п                           | X No          |
|  |               |                  | SAME AS C ABOVE  |   |                          |                         |                | affiliates includ<br>attach a list (s | led?<br>ee instructions) | Yes                                   | No            |
| 1                                      | Tax-exe       | mpt status       | X 501(c)(3) 501(c) (   | ) ◀ (insert no.)                        | 4947(a)(1) or            | 527                     |                |                                       |                          |                                       |               |
| J                                      | Websi         | ite: > N/        | A  | <u></u>                                 |                          |                         | H(c) Group     | exemption num                         | ber -                    |                                       |               |
| ĸ                                      | Form of       | organization     | X Corporation Trust  | Association Other                       | L                        | Year of Formati         | on 1998        | R M Sta                               | te of legal domic        | ile TX                                |               |
|  |               | Summar           |  |   |                          |                         |                |                                       | 3                        |                                       |               |
| <u>r a</u>                             |               |                  | <b>y</b><br>be the organization's missi  | on or most significant                  | activities DT            | OUTDE (                 | ים אות מים     | TO CUA                                | DITABLE                  |                                       |               |
|  | _             | =                | <del>-</del>   | on or most significant                  | PE                       | <u>ROVIDE</u> (         | KAMT 2         | TO_CUA                                | KTINDTE"                 |                                       |               |
| <u>S</u>                               | ū             | <u>RGANIZA</u>   | TTON2  |   |                          | <del>-</del>            |                |                                       | <b>_</b>                 |                                       |               |
| Tar.                                   | _             |                  |  | ·                                       |                          |                         |                |                                       |                          |                                       |               |
| le.                                    | 3 ~           | nook this he     | ox ► If the organizatio  |   |                          |                         |                | E% of to 5                            |                          |                                       |               |
| ်                                      | 2 Ch<br>3 Nu  |                  | oting members of the gover   |   |                          | osea of mo              | re man z       | 3% OF IES FIE                         | 3                        |                                       | 4             |
| ∞ ∞                                    | 4 N           |                  | dependent voting members   |   |                          | 16)                     |                | <b>⊢</b>                              | 4                        |                                       | <del>4</del>  |
| es                                     | 5 To          |                  | of individuals employed in   |   |                          | •                       |                | <u> </u>                              | 5                        |                                       | 0             |
| ξ                                      | 6 Tc          |                  | of volunteers (estimate if   |   | i ait v, iiie za         | ,                       |                | <u> </u>                              | 6                        |                                       | $\frac{0}{0}$ |
| 당                                      | 7 a To        |                  | ed business revenue from I   |   | line 12                  |                         |                | -                                     | 7a                       | <del></del>                           | 0.            |
| <b>Q</b>                               | h Na          | et unrelated     | I business taxable income  | from Form 990 T line                    | FIFT                     |                         | 7              | <b>⊢</b>                              | 7b                       |                                       | 0.            |
| เล็นที่ในฟฟอ)S Activities & Governance |               | et differated    | Dusiness taxable income  | HOITT OITH 99017, line                  | Star Colonia             |                         | <del></del>    | rior Year                             |                          | rrent Year                            |               |
| Š                                      | o C           | antribuitions    | and grants (Dort VIII Juan   | 1h). 818                                | 11.11.                   | 70                      | <u> </u>       |                                       |                          |                                       |               |
| Z                                      | 8 Co          |                  | and grants (Part VIII, line  | 10)                                     | JUN 25 2                 | 013 8                   | <b> </b>       | 704,76                                | ) <u> </u>               | 724,4                                 | 185.          |
| de la                                  | 9 PI          | _                | vice revenue (Part VIII, line  | , -9/                                   |                          | ان                      | l <u> </u>     |                                       |                          |                                       |               |
| rèj                                    | 10 In         |                  | ncome (Part VIII, column (A  |   |                          | ]≅[                     | ` <del> </del> |                                       |                          |                                       |               |
|  | •             |                  | e (Part VIII, column (A), lır  |   |                          | HIL                     | Ĺ              |                                       |                          |                                       |               |
| Expenses 0 700                         |               |                  | e – add lines 8 through 11   |   |                          | ne (2)                  | <u> </u>       | 704,76                                |                          | 724,4                                 |               |
| <u>;</u> =                             |               |                  | milar amounts paid (Part I   |   | -3) .                    |                         |                | 634,91                                | 1.                       | 672,3                                 | <u> 129.</u>  |
| <b>.</b>                               |               |                  | to or for members (Part I)   | • |                          |                         |                |                                       |                          |                                       |               |
| ر جا                                   | <b>15</b> Sa  | alaries, othe    | er compensation, employee  | e benefits (Part IX, co                 | lumn (A), lines          | 5-10)                   |                |                                       | <b>i</b>                 | _                                     |               |
| Sec                                    | <b>16a</b> Pr | ofessional       | fundraising fees (Part IX, c   | column (A), line 11e)                   |                          |                         |                |                                       |                          |                                       |               |
| <b>3</b> ĕ                             |               |                  | sing expenses (Part IX, col  |   | -                        |                         | · ·            | 1 2 1 2                               |                          | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |               |
| S                                      |               |                  | - ·  | · · · · · -                             |                          | 2,030.                  | 12.00          |                                       |                          |                                       |               |
| 1                                      |               | -                | es (Part IX, column (A), lir   |   |                          |                         | ļ              | 69,39                                 |                          | 52,1                                  |               |
| l                                      |               |                  | es Add lines 13-17 (must e   |   | (A), line 25)            |                         |                | 704,30                                |                          | 724,4                                 |               |
|  | 19 Re         | evenue less      | expenses Subtract line 1   | 8 from line 12                          |                          |                         |                | 45                                    | 3.                       |                                       | <u>-10.</u>   |
| Net Assets or<br>Fund Balances         |               |                  |  |   |                          |                         | Beginnin       | g of Current \                        | Year En                  | d of Year                             |               |
| ala<br>ala                             | <b>20</b> To  | otal assets (    | (Part X, line 16)  |   |                          |                         |                | 450,77                                | 1.                       | 444,6                                 | 57.           |
| Ž                                      | <b>21</b> To  | ital liabilitie  | s (Part X, line 26)  |   |                          |                         |                | 450,04                                | 5.                       | 443,9                                 | 41.           |
| žĒ                                     | 22 Ne         | et assets or     | fund balances Subtract III   | ne 21 from line 20                      |                          |                         |                | 72                                    | 6                        | 7                                     | 716.          |
| Da                                     |               | Signatur         |  |   | <del>- · · - · · ·</del> |                         | <del></del>    |                                       |                          | <u>'</u>                              | 10.           |
|  |               |                  |  |   |                          |                         |                |                                       |                          | <del></del>                           | <del></del>   |
| comp                                   | lete Decla    | ration of prepar | clare that I have examined this retu<br>rer (other than officer) is based on a | all information of which preparation    | arer has any knowled     | ments, and to tr<br>dge | ie best or m   | y knowledge ar                        | na belief, it is tru     | a, correct, ar                        | סה            |
|  |               | \ <i>H</i>       | 1117 HI CC 1   | 1000                                    | 7                        |                         |                | (                                     | 2013                     |                                       |               |
| c:~                                    |               | Signatus         | re of officer  | 24.1                                    | <u>/</u>                 |                         | Da             | <u> </u>                              | x019_                    |                                       |               |
| Sig<br>He                              | n             |                  | at MACCIALLA   | 1=0-6                                   |                          |                         |                |                                       |                          |                                       |               |
| nei                                    | e             | Type of          | print name and title   | n treasu                                | <u>1CY</u>               |                         |                |                                       |                          |                                       |               |
|  |               |                  | <del></del>  | I Description of the                    | ·                        | To-4:                   | <del></del> -  | <del></del>                           | PTIN                     |                                       |               |
|  |               |                  | reparer's name   | Preparer's signature                    |                          | Date                    | _              | Check                                 | "                        |                                       |               |
| Pai                                    | d             | CLAREN           | ICE S. FARMER  | Clam to                                 | runce                    | 6-9                     | -13            | self-employed                         | P0002                    | 2043                                  |               |
|  | parer         | Firm's name      | FARMER, FUQUA  | A & HUFF, P.C.                          |                          |                         |                |                                       |                          |                                       |               |
| Use                                    | Only          | Firm's addre     |  |   | 00                       |                         |                | Firm's EIN                            | 75-2599                  | 166                                   |               |
|  |               | 1                |  | TX 75080-2731                           |                          |                         |                |                                       |                          | 3-8000                                |               |
| Mav                                    | the IRS       | discuss th       | is return with the preparer  |   | nstructions)             |                         |                |                                       | XY                       |                                       | No            |

Form 990 (2012)

| Form       | 990 (2012) CLUBCORP CHARITIES, INC.   |   | 75-2                       | 754798            | Page <b>2</b>       |
|------------|---|---|----------------------------|-------------------|---------------------|
| Par        |   | •   |                            |                   |                     |
|            | Check if Schedule O contains a response to an   | y question in this Part III   |                            |                   |                     |
| 1          | Briefly describe the organization's mission:  |   |                            |                   |                     |
|            | PROVIDE GRANTS TO CHARITABLE ORGA   | NIZATIONS   |                            | <del>-</del>      |                     |
|            |   |   |                            |                   |                     |
|            |   |   |                            |                   |                     |
|            |   |   | <del> </del>               |                   |                     |
| 2          | Did the organization undertake any significant program se   | rvices during the year which were no                                  | l listed on the prior      |                   |                     |
|            | Form 990 or 990-EZ?   |   |                            | Yes               | X No                |
| ,          | If 'Yes,' describe these new services on Schedule O   |   |                            | □ v <sub>a=</sub> | ₩ Na                |
| 3          | Did the organization cease conducting, or make signiful if 'Yes,' describe these changes on Schedule O  | icant changes in now it conducts,                                     | any program services       | Yes               | X No                |
| 4          | · ·   | shmonts for each of its three large                                   | -1 aroaram canuaca ac      | managered by      | 0750505             |
| •          | Describe the organization's program service accomplishection $501(c)(3)$ and $501(c)(4)$ organizations and section others, the total expenses, and revenue, if any, for each other in the service of the | 4947(a)(1) trusts are required to rep<br>ich program service reported | ort the amount of grants a | nd allocations t  | o<br>O              |
| 4a         | (Code ) (Expenses \$ 672,329  | . including grants of \$  | ) (Revenue                 | \$                | )                   |
|            | ALLOWS CLUBCORP CLUBS AND SOCIETIE  | <del></del>   |                            |                   | THEIR               |
|            | CHOICE.   |   |                            | - <del> </del>    |                     |
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|            |   |   | <b></b>                    | <del>-</del>      |                     |
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|            |   |   |                            |                   |                     |
|            |   |   |                            |                   |                     |
|            |   |   |                            |                   |                     |
| 4 b        | (Code ) (Expenses \$  | including grants of \$  | ) (Revenue                 | \$                | )                   |
|            |   |   |                            |                   |                     |
|            |   |   |                            |                   |                     |
|            |   |   |                            |                   |                     |
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|            |   | - <b>-</b>  |                            |                   |                     |
|            |   |   |                            | <b></b>           |                     |
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|            |   | - <b></b>   |                            |                   |                     |
|            |   |   |                            |                   |                     |
|            | <del>-</del>  |   |                            |                   |                     |
| 4 c        | (Code) (Expenses \$   | including grants of \$  | ) (Revenue                 | \$                | )                   |
|            |   |   |                            |                   |                     |
|            |   |   |                            |                   |                     |
|            |   |   |                            |                   |                     |
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|            |   |   |                            |                   |                     |
|            |   |   |                            |                   |                     |
|            |   |   |                            |                   |                     |
|            | Other program services (Describe in Schedule O )  |   |                            |                   | `                   |
|            | (Expenses \$ including gra  |   | ) (Revenue \$              |                   | <del></del>         |
| 4 e<br>BAA | Total program service expenses ► 672  | 2,329.  |                            | Forn              | n <b>990</b> (2012) |
| ~~~        |   | TEEA0102L 08/08/12  |                            | . 511             | ()                  |

|      | r   |      | 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    | Х   |            |
| 2    | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?   | 2    |     | Х          |
| 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    |     | Х          |
| 4    | Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II   | 4    |     | X          |
| 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    |     | Х          |
| 6    | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I  | 6    |     | X          |
| 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    |     | <u> </u>   |
| 8    | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III   | 8    |     | <u> </u>   |
| 9    | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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    |     | X          |
| 10   | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V  | 10   |     | <u>X</u> _ |
| 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  |      |     |            |
| 4    | a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI  | 11 a |     | X_         |
| ı    | 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   | 11 b |     | <u> </u>   |
| •    | 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   | 11 c |     | <u> </u>   |
| •    | 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  | 11 d |     | X          |
| •    | Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X   | 11 e |     | <u>X</u>   |
|      | 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  | 11 f |     | <u> </u>   |
| 12 a | a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII   | 12a  | _   | <u>X</u>   |
|      | 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 and XII is optional   | 12 b |     | <u>x</u>   |
|      | Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E   | 13   |     | <u>X</u>   |
| 14 a | a Did the organization maintain an office, employees, or agents outside of the United States?   | 14a  |     | X          |
| t    | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV | 14b  |     | х          |
| 15   | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV   | 15   |     | X          |
| 16   | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV   | 16   |     | <u> </u>   |
| 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   |     | X          |
| 18   | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II  | 18   |     | Х          |
| 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   |     | X          |
|      | Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H   | 20   |     | X          |
| b    | of 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?  | 20 b |     |            |

| _         | m 990 (2012) CLUBCORP CHARITIES, INC.  | 75-2754798                                  | F   | Page 4     |
|-----------|--|---|-----|------------|
| <u>Pa</u> | art IV   Checklist of Required Schedules (continued)   | <del></del>                                 |     |            |
|           |  | 1   | Yes | No         |
| 21        | Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in United State's on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II  | n the <b>21</b>                             |     | х          |
| 22        | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States of IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III   | on Part 22                                  | х   |            |
| 23        | Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J   | current 23                                  |     | Х          |
| 24        | a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b throug complete Schedule K. If 'No,'go to line 25                                  | as of<br>th 24d and<br>24a                  |     | Х          |
|           | <b>b</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 de any tax-exempt bonds?  | efease . 24c                                | }   |            |
|           | d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  | 24d   |     |            |
| 25        | a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction disqualified person during the year? If 'Yes,' complete Schedule L, Part I   | tion with a                                 |     | х          |
|           | <b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior ye that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' com Schedule L, Part I                                     | ear, and plete 25b                          |     | х          |
| 26        | Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule  | or<br>e L, Part II <b>26</b>                |     | х          |
| 27        | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantia contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family me of any of these persons? If 'Yes,' complete Schedule L, Part III | nl<br>mber <b>27</b>                        |     | X          |
| 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)   | , 1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, |     | \$ ^ .<br> |
| 1         | a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV  | 28a   |     | X          |
| 1         | <b>b</b> A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV  | 28b   |     | х          |
| (         | c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) wa officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV   | s an <b>28c</b>                             |     | Х          |
| 29        | Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule I   | M 29  |     | X          |
| 30        | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified contributions? If 'Yes,' complete Schedule M  | conservation 30                             |     | Х          |
| 31        | Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule   | N, Part I 31                                |     | X          |
| 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  |     | Х          |
| 33        | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sec 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I  | ctions 33                                   |     | Х          |
| 34        | Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts I and V, line 1   | I, III, IV,                                 |     | Х          |
| 35 a      | a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  | 35a   |     | X          |
| i         | <b>b</b> If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a c entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2  | ontrolled 35b                               |     |            |
| 36        | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable re  | elated                                      |     | x          |

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O BAA

Form 990 (2012)

X

Х

37

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

|      | Check if Schedule O contains a response to any question in this Part V   |  |          | Yes | No                  |
|------|--|--|----------|-----|---------------------|
| 1:   | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   | l 1al 0  |          |     | 140                 |
|      | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  | 16 0   | [        | [   |                     |
|      | Did the organization comply with backup withholding rules for reportable payments to vendors and   | reportable gaming                              |          |     |                     |
|      | (gambling) winnings to prize winners?  | t I  | 1 c      |     |                     |
| 2    | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return                                  | 2a 0   | - [      |     |                     |
| ı    | of at least one is reported on line 2a, did the organization file all required federal employment  | <del></del>                                    | 2 b      |     |                     |
| ,    | <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see i   | •  | -20      |     |                     |
| 3 :  | Did the organization have unrelated business gross income of \$1,000 or more during the year.  |  | 3 a      |     | Х                   |
|      | olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule C   |  | 3 b      |     |                     |
|      | At any time during the calendar year, did the organization have an interest in, or a signature or oth  | •  |          |     |                     |
|      | financial account in a foreign country (such as a bank account, securities account, or other   | inancial account)?                             | 4 a      |     | X                   |
| -    | of Yes,' enter the name of the foreign country   |  |          |     |                     |
| _    | See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and   |  | _        | - } | . <u>Ú</u>          |
|      | Was the organization a party to a prohibited tax shelter transaction at any time during the tax  | ·  | 5 a      |     | X                   |
|      | Did any taxable party notify the organization that it was or is a party to a prohibited tax shell  | ter transaction?                               | 5 b      |     |                     |
| •    | If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?   | }  | 5 c      |     |                     |
| 6    | Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?                               | and did the organization                       | 6 a      |     | X                   |
| 1    | If 'Yes,' did the organization include with every solicitation an express statement that such contribunot tax deductible?  | ions or gifts were                             | 6 ь      |     |                     |
| 7    | Organizations that may receive deductible contributions under section 170(c).  |  |          |     |                     |
| •    | Did the organization receive a payment in excess of \$75 made partly as a contribution and services provided to the payor?   | partly for goods and                           | 7 a      |     | X                   |
| ì    | olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?   |  | 7 b      |     |                     |
| •    | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it   | was required to file                           |          |     | v                   |
|      | Form 8282?   |  | 7 c      | }   | X                   |
|      | If 'Yes,' indicate the number of Forms 8282 filed during the year  | 7d   |          |     | X                   |
|      | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal  | }  | 7e<br>7f |     | $\frac{\Lambda}{X}$ |
|      | Did the organization, during the year, pay premiums, directly or indirectly, on a personal ber   | ì  |          |     |                     |
| ć    | If the organization received a contribution of qualified intellectual property, did the organization file as required?   | Form 8899                                      | 7 g      |     | _                   |
| ł    | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form $1098\text{-}C$ ?   | e organization file a                          | 7 h      |     |                     |
| 8    | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year? | ng organizations. Did the nave excess business | <br>8    |     | X                   |
| 9    | Sponsoring organizations maintaining donor advised funds.  |  |          |     |                     |
|      | Did the organization make any taxable distributions under section 4966?  |  | 9 a      | ~   |                     |
|      | Did the organization make a distribution to a donor, donor advisor, or related person?   |  | 9 b      |     |                     |
|      | Section 501(c)(7) organizations. Enter   |  |          |     |                     |
|      | Initiation fees and capital contributions included on Part VIII, line 12   | 10a  | ]        |     |                     |
| Ŀ    | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  | 10 Ь   |          | İ   |                     |
| 11   | Section 501(c)(12) organizations. Enter  |  |          |     |                     |
| а    | Gross income from members or shareholders .  | 11 a   |          | -   |                     |
| b    | Gross income from other sources (Do not net amounts due or paid to other sources   |  |          | Į   |                     |
|      | against amounts due or received from them )  | 116  |          |     |                     |
|      | Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu   |  | 12 a     |     |                     |
|      | If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year  | 12b  |          | İ   | _                   |
|      | Section 501(c)(29) qualified nonprofit health insurance issuers.   | İ  | 12-      | - 1 | ·                   |
| a    | Is the organization licensed to issue qualified health plans in more than one state?   |  | 13 a     |     |                     |
|      | Note. See the instructions for additional information the organization must report on Schedu   | ie O   |          | 1   | ٠.                  |
| D    | 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  | 13ь  |          | 1   |                     |
| c    | Enter the amount of reserves on hand   | 13c  |          |     |                     |
| 14 a | Did the organization receive any payments for indoor tanning services during the tax year?   | LL   | 14a      |     | X                   |
| 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 line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee or key employee? 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 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 X Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 a X b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7 b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. a The governing body? 8 a b Each committee with authority to act on behalf of the governing body? 8ь X Is there any officer, director or 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 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O Х 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 120 Schedule O how this is done 13  $\bar{\mathbf{X}}$ 13 Did the organization have a written whistleblower policy? X 14 14 Did the organization have a written document retention and destruction policy? 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? X a The organization's CEO, Executive Director, or top management official 15 a **b** Other officers of key employees of the organization 15<sub>b</sub> X 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? X 16 a b If 'Yes,' did the organization follow 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? 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > NONE Section 6104 requires an organization to make its Forms 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. Another's website X Upon request Other (explain in Schedule O) 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 during the tax year SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization.

CLUBCORP FINANCIAL MGMT 3030 LBJ FREEWAY, STE 400 DALLAS TX 75234 214-243-6191

| Form <b>990</b> |         |                          | CHARITIES,        |           | 75-275 <u>4</u> 798                                  | Page 7    |
|-----------------|---------|--------------------------|-------------------|-----------|--|-----------|
| Part VII        | Comp    | ensation o<br>endent Cor | f Officers, Dire  | ectors, T | Trustees, Key Employees, Highest Compensated Employe | es, and   |
|                 | Check   | ıf Schedule O            | contains a respor |           | question in this Part VII                            | <u></u> [ |
| Section         | A. Offi | cers, Direct             | tors, Trustees    | , Key En  | nployees, and Highest Compensated Employees          |           |

1 a 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. 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.

|X| Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (F) Position (do not check more than one box, unless person is both an officer and a director/trustee) (D) (E) (A) Name and Title (B) Average hours per week (list any hours for related organiza tions below dotted line) Reportable compensation from related organizations (W-2/1099-MISC) Reportable compensation from the organization (W 2/1099-MISC) Estimated amount of other compensation from the employee Individual trustee institutional Key employee Highest compensated ormer organization and related organizations director I trustee (1) ERIC AFFELDT 0 0 0. PRESIDENT 0 X (2) CURT MCCLELLAN 0. 0 0 TREASURER 0 INGRID KEISER 1 э O SECRETARY 0 X 0 (4) (5) (6) (7) (8) (9) (10)(11)(12) (13) (14)

| Tark V      | (A) Name and title  | Average hours per           | (do            | not o<br>, unle | Pos<br>check<br>ess pe | sition<br>more<br>erson<br>direct |                        | one<br>an<br>ee) | (D)  Reportable compensation from the organization (W-2/1099-MISC) | (E)  Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|-------------|---|-----------------------------|----------------|-----------------|------------------------|-----------------------------------|------------------------|------------------|--|---|--|
| (15)        |   |                             | -              |                 |                        | -                                 |                        |                  |  |   |  |
| (16)        |   |                             | -              |                 |                        |                                   |                        | i                |  |   |  |
| <u>(17)</u> |   |                             |                |                 |                        |                                   |                        |                  |  |   |  |
| <u>(18)</u> |   |                             | -              |                 |                        |                                   |                        |                  |  |   |  |
| (19)        |   |                             | ļ              |                 |                        |                                   |                        |                  |  |   |  |
| (20)        |   |                             |                |                 |                        |                                   |                        |                  |  |   |  |
| (21)        |   |                             |                |                 |                        |                                   |                        | _                |  |   |  |
| (22)        |   |                             |                |                 |                        |                                   |                        |                  |  | ,   |  |
| (23)        |   |                             |                |                 |                        |                                   |                        | _                |  |   |  |
| (24)        |   |                             | _              |                 |                        |                                   |                        |                  |  |   |  |
| (25)        |   |                             |                |                 |                        |                                   |                        |                  |  | ······································                                  |  |
| d Tota      | al from continuation sheets to Part VII, Section al (add lines 1b and 1c) Il number of individuals (including but not limited to  |                             | sted           | abov            | ve) v                  | vho i                             | eceiv                  | ed               | 0.<br>0.<br>0.<br>more than \$100,00                               | 0.<br>0.<br>0.<br>0 of reportable comp                                  | 0.<br>0.<br>0.<br>pensation  |
| 3 Did on l  | the organization of the organization list any former officer, directorine 1a? If 'Yes,' complete Schedule J for such any individual listed on line 1a, is the sum of reorganization and related organizations greater in Individual | <i>individu</i><br>eportabl | al<br>e co     | mpe             | nsa                    | tion                              | and o                  | othe             | er compensation  |   | Yes No  3 X  59  |
| for s       | any person listed on line 1a receive or accrue of services rendered to the organization? If 'Yes,'  | compen<br>comple            | satio<br>te Sc | n fre<br>hea    | om :<br>lule           | any<br><i>J fo</i>                | unrel<br>r <i>sucl</i> | ate<br>h pe      | d organization or<br>erson   | ındıvıdual<br>  | 5 X  |
|             | B. Independent Contractors  plete this table for your five highest compensa pensation from the organization. Report compensa  | ted inde                    | pen            | dent            | cor                    | ntrac                             | tors                   | tha              | t received more th   | nan \$100,000 of  |  |
| com         | pensation from the organization. Report compensa (A) Name and business addres   |                             | he ca          | alen            | dar <u>y</u>           | <u>ear</u>                        | endin                  | g w              | oth or within the ord<br>( <b>B)</b><br>Description o              |   | (C)<br>Compensation  |
|             | I number of independent contractors (including but  | not limit                   | ted to         | tho             | se li                  | sted                              | abov                   | e) v             |  |   |  |
| BAA         | 0,000 in compensation from the organization   | <u> </u>                    | FEAO           | 1081            | 01/2                   | 24/13                             |                        |                  |  |   | Form <b>990</b> (2012)   |

| <u> </u>   | Check if Schedule O contains a response to any questi  | on in this Part VIII                   |  |   | П   |
|--|--|--|--|---|---|
|  |  | (A)<br>Total revenue                   | (B) Related or exempt function revenue | (C)<br>Unrelated<br>business<br>revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS | 1 a Federated campaigns b Membership dues. c Fundraising events d Related organizations e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above  g Noncash contributions included in Ins 1a-1f: \$ |  |  |   |   |
|  | h Total Add lines 1a 1f  | 724,485.                               |  |   | ]   |
| PROGRAM SERVICE REVENUE                                | Business Code  2 a  b  c  d  |  | ~                                      | -                                       | -   |
| OGRA   | f All other program service revenue  |  |  |   |   |
| <u>~</u>   | g Total. Add lines 2a-2f   |  |  |   |   |
|  | <ul> <li>Investment income (including dividends, interest and other similar amounts)</li> <li>Income from investment of tax-exempt bond proceeds</li> <li>Royalties</li> </ul>   |  |  |   |   |
|  | (i) Real (ii) Personal  6 a Gross rents  b Less rental expenses. c Rental income or (loss) d Net rental income or (loss)   |  |  |   |   |
|  | 7 a Gross amount from sales of assets other than inventory.  (i) Securities (ii) Other   | -                                      |  |   |   |
|  | b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)   | ************************************** |  |   |   |
| OTHER REVENUE  | 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18.  b Less. direct expenses b  |  |  |   |   |
| Ы  | c Net income or (loss) from fundraising events   |  |  |   |   |
|  | 9 a Gross income from gaming activities See Part IV, line 19   | e grand is                             |  |   |   |
|  | b Less direct expenses b   |  |  |   | l   |
|  | c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances  | . ,                                    |  |   |   |
| Ì  | <b>b</b> Less. cost of goods sold <b>b</b>   |  |  |   |   |
|  | c Net income or (loss) from sales of inventory .   |  |  |   |   |
|  | Miscellaneous Revenue Business Code  |  |  |   |   |
|  | 11a<br>b   |  |  |   |   |
|  | d All other revenue  | <u> </u>                               |  |   | <del> </del>  |
|  | e Total. Add lines 11a-11d .   |  |  |   |   |
| l  | 12 Total revenue. See instructions   | 724,485.                               | 0.                                     | 0.                                      | 0.  |

| <u>Sec</u> | tion 501(c)(3) and 501(c)(4) organizations must cor  |                       |                              | omplete column (A)                  |                                       |
|------------|--|-----------------------|------------------------------|-------------------------------------|---------------------------------------|
|            | Check if Schedule O contains a   |                       |                              | (C)                                 | (0)                                   |
| Do<br>7b,  | not include amounts reported on lines 6b,<br>8b, 9b, and 10b of Part VIII  | (A)<br>Total expenses | (B) Program service expenses | (C) Management and general expenses | <b>(D)</b><br>Fundraising<br>expenses |
| 1          | Grants and other assistance to governments and organizations in the United States See Part IV, line 21   |                       |                              |                                     |                                       |
| 2          | Grants and other assistance to individuals in the United States See Part IV, line 22   | 672,329.              | 672,329.                     |                                     |                                       |
| 3          | Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16  |                       |                              |                                     |                                       |
| 4          | Benefits paid to or for members  |                       |                              | _                                   |                                       |
| 5          | Compensation of current officers, directors, trustees, and key employees   | 0.                    | 0.                           | 0.                                  | 0.                                    |
| 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.                    | 0.                           | 0.                                  | 0.                                    |
| 7          | Other salaries and wages   |                       | ĺ                            |                                     |                                       |
| 8          | Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)   |                       |                              |                                     |                                       |
| 9          | Other employee benefits  |                       |                              |                                     |                                       |
| 10         | Payroll taxes  |                       |                              |                                     |                                       |
| 11         | Fees for services (non-employees)  |                       |                              |                                     |                                       |
|            | a Management   |                       | İ                            |                                     |                                       |
|            | Legal  |                       | <del></del>                  |                                     |                                       |
|            | c Accounting   |                       |                              |                                     |                                       |
|            | Lobbying   |                       |                              |                                     | <del></del>                           |
|            | , ,  |                       |                              |                                     |                                       |
|            | Professional fundraising services See Part IV, line 17   |                       |                              |                                     |                                       |
|            | Investment management fees   |                       |                              |                                     |                                       |
|            | other (If line 11g amt exceeds 10% of line 25, col-<br>umn (A) amt, list line 11g expenses on Sch 0)<br>Advertising and promotion  |                       |                              |                                     |                                       |
| 13         | Office expenses  | ·                     |                              |                                     |                                       |
| 14         | Information technology   |                       |                              |                                     |                                       |
|            | Royalties  |                       |                              |                                     |                                       |
| 15         |  |                       |                              |                                     |                                       |
| 16         | Occupancy  | <u>.</u> -            |                              |                                     |                                       |
| 17         | Travel   |                       |                              |                                     |                                       |
| 18         | Payments of travel or entertainment expenses for any federal, state, or local public officials.  |                       |                              |                                     |                                       |
| 19         | Conferences, conventions, and meetings.  | 52,030.               |                              |                                     | 52,030.                               |
| 20         | Interest   |                       |                              |                                     |                                       |
| 21         | Payments to affiliates.  |                       |                              |                                     |                                       |
| 22         | Depreciation, depletion, and amortization  |                       |                              |                                     |                                       |
| 23         | Insurance  |                       |                              |                                     |                                       |
| 24         | Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)                             | , A                   |                              | : -                                 |                                       |
| а          | BANK CHARGES   | 133.                  |                              | 133.                                |                                       |
|            | OTHER TAXES  | 3.                    |                              | 3.                                  |                                       |
| c          |  | <u></u>               |                              |                                     |                                       |
| d          |  |                       |                              |                                     |                                       |
| _          | All other expenses   |                       |                              | <del></del>                         |                                       |
|            | <b>}</b>   |                       |                              | <del></del> +                       | F0 030                                |
| 25         | Total functional expenses. Add lines 1 through 24e   | 724,495.              | 672,329.                     | 136.                                | 52,030.                               |
| 26         | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here \( \bigcup \] if following SOP 98-2 (ASC 958-720) |                       | ļ                            |                                     |                                       |

Part X

Balance Sheet Check if Schedule O contains a response to any question in this Part X (A) Beginning of year End of year 210,641 Cash - non-interest-bearing 1 181,392 2 Savings and temporary cash investments Pledges and grants receivable, net 240,130 3 263,265. 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other 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). Complete Part II of Schedule L. 6 Notes and loans receivable, net 7 Inventories for sale or use. 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 10b b Less accumulated depreciation 10 c 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 15 Other assets See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34). 16 450,771 444,657. 17 Accounts payable and accrued expenses 450,045. 17 443,941 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 21 ABIL Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties. 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 25 Total liabilities. Add lines 17 through 25. 26 443,941 450,045 Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 726 716. 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 R Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. Capital stock or trust principal, or current funds. 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds. 32 33 Total net assets or fund balances 33 716. 726 Total liabilities and net assets/fund balances 34 450, 771 34 444,657 BAA Form 990 (2012)

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|     | (2012) CLUBCORP CHARITIES, INC. 75-2754798   |           |                                   |  |               |  |  |  |  |  |  |  |
|-----|--|-----------|-----------------------------------|--|---------------|--|--|--|--|--|--|--|
| Pa  | rt XI Reconciliation of Net Assets   |           |                                   |  |               |  |  |  |  |  |  |  |
|     | 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         | 72                                | 4,4  | 85.           |  |  |  |  |  |  |  |
| 2   | Total expenses (must equal Part IX, column (A), line 25)   | 2         | 72                                | 4,4  | 95.           |  |  |  |  |  |  |  |
| 3   | Revenue less expenses Subtract line 2 from line 1  | 3         |                                   |  | 10.           |  |  |  |  |  |  |  |
| 4   | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  | 4         |                                   | 7  | 26.           |  |  |  |  |  |  |  |
| 5   | Net unrealized gains (losses) on investments   | 5         | _                                 |  |               |  |  |  |  |  |  |  |
| 6   | Donated services and use of facilities   | 6         |                                   |  |               |  |  |  |  |  |  |  |
| 7   | Investment expenses  | 7         |                                   |  |               |  |  |  |  |  |  |  |
| 8   | Prior period adjustments .   | _ 8       |                                   |  |               |  |  |  |  |  |  |  |
| 9   | Other changes in net assets or fund balances (explain in Schedule O)   | 9         |                                   |  | 0.            |  |  |  |  |  |  |  |
| 10  | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))  | 10        |                                   | 7  | <br>16.       |  |  |  |  |  |  |  |
| Pai | rt XII   Financial Statements and Reporting  |           |                                   |  |               |  |  |  |  |  |  |  |
|     | Check if Schedule O contains a response to any question in this Part XII   |           |                                   |  |               |  |  |  |  |  |  |  |
| _   |  |           |                                   | Yes  | No            |  |  |  |  |  |  |  |
| 1   | Accounting method used to prepare the Form 990 Cash X Accrual Other  |           | 1                                 |  |               |  |  |  |  |  |  |  |
|     | If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O   |           |                                   |  | ļ             |  |  |  |  |  |  |  |
| 2:  | a Were the organization's financial statements compiled or reviewed by an independent accountant?  |           | 2 a                               |  | X             |  |  |  |  |  |  |  |
|     | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revies eparate basis, consolidated basis, or both.  | ewed on a | 23 2                              | (g.,   | - ,           |  |  |  |  |  |  |  |
|     | Separate basis Consolidated basis Both consolidated and separate basis   |           |                                   |  | -             |  |  |  |  |  |  |  |
| ì   | b Were the organization's financial statements audited by an independent accountant?   |           | 2 b                               | Х  |               |  |  |  |  |  |  |  |
|     | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both  X Separate basis  Consolidated basis  Both consolidated and separate basis | arate     |                                   | 32<br>13<br>13<br>13<br>13<br>13<br>13<br>13<br>13<br>13<br>13<br>13<br>13<br>13 | !             |  |  |  |  |  |  |  |
| •   | c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the au review, or compilation of its financial statements and selection of an independent accountant?     | dıt,      | 2 c                               | х  |               |  |  |  |  |  |  |  |
|     | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O   |           | - 8 - 1 5<br>8 - 1 5<br>2 - 2 - 1 |  |               |  |  |  |  |  |  |  |
| 3 a | a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single<br>Audit Act and OMB Circular A-133?  | 9         | 3 a                               |  | <u>X</u>      |  |  |  |  |  |  |  |
| t   | of Yes, did the organization undergo the required audit or audits? If the organization did not undergo the required a or audits, explain why in Schedule O and describe any steps taken to undergo such audits.            | audit     | . 3b                              |  |               |  |  |  |  |  |  |  |
| BAA |  |           | Form                              | 990 (  | 2012 <u>)</u> |  |  |  |  |  |  |  |

#### **SCHEDULE A** (Form 990 or 990-EZ)

#### **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.

OMB No 1545-0047 2012

Open to Public Inspection Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization Employer identification number CLUBCORP CHARITIES, INC. 75-2754798

| Par  | <u>t I</u> | Reason for Pub   | lic Charity Status  | (All organizations   | must o                         | comple                                       | te this                                     | part.)               | See i                       | nstruct                               | ions.                        |                  |               |
|--|------------|--|---|--|--------------------------------|--|---|----------------------|-----------------------------|---------------------------------------|------------------------------|------------------|---------------|
| The  | orga       | nization is not a priva                                      | ate foundation becaus   | e it is (For lines 1 thro  | ugh 11,                        | check o                                      | nly one                                     | box)                 |                             |                                       |                              |                  |               |
| 1  |            | A church, convention   | n of churches or asso   | ciation of churches des  | cribed in                      | sectio                                       | n 1 <b>70</b> (b)                           | (1)(A)(i)            | ).                          |                                       |                              |                  |               |
| 2  | Г          | A school described i   | n section 170(b)(1)(A)  | (ii). (Attach Schedule E   | Ξ)                             |  |   |                      |                             |                                       |                              |                  |               |
| 3  |            | A hospital or a coop   | erative hospital servic   | e organization describe  | ed in <b>se</b> c              | ction 17                                     | 0(b)(1)(A                                   | A)(iii).             |                             |                                       |                              |                  |               |
| 4  | Г          | A medical research   | organization operated   | in conjunction with a h  | nospital                       | describe                                     | d in sec                                    | tion 17              | 0(b)(1)(/                   | A)(iii) E                             | nter the hos                 | pital's          | s             |
|  | _          | name, city, and state  | 9   |  |                                |  |   |                      |                             |                                       |                              |                  |               |
| 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). |            |  |   |  |                                |  |   |                      |                             |                                       |                              |                  |               |
| 6  | Г          |  |   | overnmental unit descri  | ibed in s                      | ection                                       | 170(b)(1)                                   | (A)(v).              |                             |                                       |                              |                  |               |
| 7  |            |  | ormally receives a sub:<br><b>A)(vi). (</b> Complete Pai                    | stantial part of its suppor<br>rt II )   | t from a                       | governm                                      | iental un                                   | it or fron           | n the ger                   | neral pub                             | lic described                | i                |               |
| 8  |            | A community trust de   | escribed in section 17  | <b>70(b)(1)(A)(vi).</b> (Comple  | te Part                        | II )   |   |                      |                             |                                       |                              |                  |               |
| 9  | X          | ' related to its exempt f                                    | unctions - subject to c   | re than 33-1/3% of its sup<br>ertain exceptions, and (2<br>1 tax) from businesses acq                | no mor                         | e than 3                                     | 3-1/3% c                                    | of its suc           | port from                   | n gross ii                            | nvestment ir                 | m acti<br>ncome  | vities<br>and |
| 10   |            | An organization orga   | anized and operated e   | exclusively to test for pu   | ublic saf                      | ety See                                      | section                                     | 1 509(a)             | (4).                        |                                       |                              |                  |               |
| 11   |            | ' supported organization                                     | zed and operated exclus<br>ns described in section<br>ion_and complete line | sively for the benefit of, to<br>509(a)(1) or section 509<br>is 11e through 11h                      | perform<br>(a)(2) S            | the func<br>ee <b>sectio</b>                 | tions of,<br>on <b>509(a)</b>               | or carry<br>(3). Che | out the p<br>ck the bo      | ourposes on that de                   | of one or mo<br>escribes the | re pub<br>type o | olicly<br>of  |
|  |            | a Type I b   | ı ∏Type II c  | Type III - Function  | nally inte                     | egrated                                      | •   | d ∏ i                | Type III                    | - Non-f                               | unctionally                  | ıntegr           | rated         |
| е  |            | By checking this box other than foundation section 509(a)(2) | r, I certify that the org<br>managers and other tha                         | anization is not control<br>an one or more publicly s  | led direct                     | tly or indicated organization                | directly<br>ations d                        | by one<br>escribed   | or more<br>in section       | e disqual<br>on 509(a)                | Ified persor<br>(1) or       | ıs               |               |
| f  |            |  | eived a written determii  | nation from the IRS that   | ıs a Type                      | l, Type                                      | II or Typ                                   | e III sup            | porting                     | organizat                             | ion,                         |                  |               |
| g  |            | Since August 17, 200   | 06, has the organizati  | on accepted any gift o   | r contrib                      | oution fr                                    | om any                                      | of the f             | ollowing                    | persons                               | 57                           |                  |               |
|  |            |  | _   |  |                                |  | _   |                      |                             |                                       |                              | Yes              | No            |
|  |            | (i) A person who obelow, the gove                            | directly or indirectly co<br>erning body of the sup                         | ontrols, either alone or oported organization?   | togethe                        | r with pe                                    | ersons d                                    | lescribe             | d in (ii)                   | and (III)                             | 11 g (i)                     |                  |               |
|  |            | (ii) A family memb   | er of a person descri   | bed in (i) above?  |                                |  |   |                      |                             |                                       | 11 g (ii)                    |                  | 1             |
|  |            | (iii) A 35% controlle  | ed entity of a person   | described in (i) or (ii) a   | bove?                          |  |   |                      |                             |                                       | 11 g (iii)                   |                  | $\vdash$      |
| h  |            |  |   | e supported organization   |                                |  |   |                      |                             |                                       |                              |                  | <u> </u>      |
|  |            | (i) Name of supported<br>organization                        | (ii) EIN  | (iii) Type of organization<br>(described on lines 1-9<br>above or IRC section<br>(see instructions)) | organiz<br>column (<br>your go | is the sation in i) listed in overning ment? | (v) Did yo<br>the organ<br>column (<br>supp | ization in           | organiz<br>colui<br>organiz | Is the zation in mn (i) ed in the S ? | (vii) Amoun<br>sup           | of mor           | netary        |
|  |            |  |   |  | Yes                            | No   | Yes   | No                   | Yes                         | No                                    |                              |                  |               |
| (A)  |            |  |   |  |                                |  |   |                      |                             |                                       |                              |                  |               |
| (B)  |            |  |   | -  |                                |  |   |                      |                             |                                       |                              |                  |               |
| (C)  |            |  |   |  |                                |  |   |                      |                             |                                       |                              |                  |               |
|  | -          |  |   |  |                                |  |   | <del>-</del>         | <del></del>                 |                                       |                              |                  |               |
| <u>(D)</u>   |            |  |   |  | <del> </del>                   |  |   |                      |                             |                                       |                              |                  |               |
| <u>(E)</u>   |            | <del></del>  |   |  |                                |  |   |                      |                             |                                       |                              |                  |               |

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

| <u>i al</u> | (Complete only if you checked organization fails to qualify   | I the box on line 5, | 7, or 8 of Part I or  | if the organization   | failed to qualify un  | der Part III If the | <b>-</b> .,                 |
|-------------|---|----------------------|-----------------------|-----------------------|-----------------------|---------------------|-----------------------------|
| Sec         | tion A. Public Support  |                      |                       |                       |                       |                     |                             |
| begi        | ndar year (or fiscal year<br>nning in) ►  | (a) 2008             | <b>(b)</b> 2009       | (c) 2010              | (d) 2011              | <b>(e)</b> 2012     | (f) Total                   |
| 1           | Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants.')   |                      |                       |                       |                       |                     |                             |
| 2           | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf   |                      |                       |                       |                       |                     |                             |
| 3           | The value of services or facilities furnished by a governmental unit to the organization without charge   |                      |                       |                       |                       |                     |                             |
| 4           | Total. Add lines 1 through 3  |                      |                       |                       |                       |                     |                             |
| 5           | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) |                      |                       |                       |                       |                     |                             |
| 6           | <b>Public support.</b> Subtract line 5 from line 4  |                      |                       |                       |                       |                     |                             |
| <u>sec</u>  | tion B. Total Support   | <del></del>          | <del>_</del>          | I'''                  |                       |                     |                             |
| ale<br>egi  | ndar year (or fiscal year<br>nning in) ►  | (a) 2008             | <b>(b)</b> 2009       | (c) 2010              | (d) 2011              | <b>(e)</b> 2012     | (f) Total                   |
| 7           | Amounts from line 4   |                      |                       |                       |                       |                     |                             |
| 8           | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  |                      |                       |                       |                       |                     |                             |
| 9           | Net income from unrelated<br>business activities, whether or<br>not the business is regularly<br>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 activ   | ities, etc (see ins  | tructions)            |                       |                       | 12                  |                             |
| 13          | First five years. If the Form 990 is organization, check this box and   |                      | n's first, second, th | urd, fourth, or fifth | tax year as a section | on 501(c)(3)        | ▶ [                         |
| ec          | tion C. Computation of Pul  | blic Support F       | Percentage            |                       |                       |                     |                             |
| 14          | Public support percentage for 20  | 12 (line 6, colum    | n (f) divided by lii  | ne 11, column (f))    | )                     | 14                  | %                           |
| 15          | Public support percentage from 2  | 2011 Schedule A      | Part II, line 14      |                       |                       | 15                  | %                           |
|             | 33-1/3% support test $-$ 2012. If and stop here. The organization   | qualifies as a pul   | blicly supported o    | rganization           |                       |                     | ► [                         |
| b           | <b>33-1/3% support test</b> — <b>2011.</b> If t and <b>stop here.</b> The organization  |                      |                       |                       | 5a, and line 15 is    | 33-1/3% or more,    | check this box              |
| 17 a        | 10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'  | meets the 'facts-a   | and-circumstance      | s' test, check this   | box and stop he       | re. Explain in Part | IV how                      |
| b           | 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and   | meets the 'facts-a   | and-circumstance      | s' test, check this   | box and stop he       | re. Explain in Part | 15 is 10%<br>IV how the ► [ |

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 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 )

|  | tion A. Public Support   |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
|  | dar year (or fiscal yr beginning in)   | (a) 2008   | <b>(b)</b> 2009  | (c) 2010   | (d) 2011   | (e) 2012   | (f) Total  |
| 1  | Gifts, grants, contributions<br>and membership fees<br>received (Do not include  | 052 570  | 600 506  | 071 110  | 704 761  | 724 405  | 2 070 560  |
| 2  | 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   | 963,679.   | 608,526.   | 871,112.   | 704,761.   | 724,485.   | 3,872,563.   |
| 3  | Gross receipts from activities that are not an unrelated trade or business under section 513   |  | 1  |  |  |  | 0.   |
|  | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  |  |  |  |  |  | 0.   |
| 5  | The value of services or facilities furnished by a governmental unit to the organization without charge  |  |  |  |  |  | 0.   |
|  | Total. Add lines 1 through 5   | 963,679.   | 608,526.   | 871,112.   | 704,761.   | 724,485.   | 3,872,563.   |
| 7 a  | Amounts included on lines 1,<br>2, and 3 received from<br>disqualified persons   | 0.   | 0.   | 0.   | 0.   | 0.   | 0.   |
| t  | Amounts included on lines 2<br>and 3 received from other than<br>disqualified persons that<br>exceed the greater of \$5,000 or<br>1% of the amount on line 13  |  |  |  |  |  |  |
|  | for the year   | 0.   | 0.   | 0.   | 0.   | 0.   | 0.   |
|  | : Add lines 7a and 7b  | 0.   | 0.   | 0.   | 0.   | 0.   | 0.   |
| 8  | Public support (Subtract line 7c from line 6)  | , _  | , ,  |  |  | * * , **   | 3,872,563.   |
|  | tion B. Total Support  |  |  |  |  |  |  |
|  | dar year (or fiscal yr beginning in) 🟲 👚   | (a) 2008   | <b>(b)</b> 2009  | (c) 2010   | <b>(d)</b> 2011  | <b>(e)</b> 2012  | (f) Total  |
|  | Amounts from line 6  | 963,679.   | 608,526.   | 871,112.   | 704,761.   | 724,485.   | 3,872,563.   |
| 70   |  |  |  |  |  |  |  |
|  | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses  |  |  |  |  |  | 0.   |
| b  | 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   | 0  | 0  | 0  | 0  | 0  | 0.   |
| b  | dividends, payments received on securities loans, rents, royalties and income from similar sources of Unrelated business taxable income (less section 511 taxes) from businesses   | 0.   | 0.   | 0.   | 0.   | 0.   | 0.   |
| 6<br>11  | 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  Net income from unrelated business activities not included in line 10b, whether or not the business is   | 0.   | 0.   | 0.   | 0.   | 0.   | 0.   |
| 11 CT 12   | 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 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 gain or loss from the sale of capital assets (Explain in  |  |  |  |  |  | 0.<br>0.<br>0.                                     |
| 11<br>12   | 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 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 gain or loss from the sale of capital assets (Explain in Part IV)   | 963,679.   | 608,526.   | 871,112.   | 704,761.   | 724,485.   | 0.<br>0.<br>0.<br>3,872,563.                       |
| 11 12 13 14  | 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. 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 gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add Ins 9, 10c. 11, and 12.)  First five years. If the Form 990   | 963, 679.<br>is for the organiza<br>stop here  | 608, 526.<br>tion's first, second  | 871,112.   | 704,761.   | 724,485.   | 0.<br>0.<br>0.<br>3,872,563.                       |
| 11 12 13 14 Sec  | 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. 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 gain or loss from the sale of capital assets (Explain in Part IV).  Total support. (Add Ins 9, 10c. 11, and 12). First five years. If the Form 990 organization, check this box and   | 963, 679. Is for the organiza stop here  | 608, 526.<br>tion's first, second  | 871,112.<br>I, third, fourth, o  | 704,761.   | 724,485.   | 0.<br>0.<br>0.<br>3,872,563.                       |
| 11 12 13 14 Sec 15   | 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. 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 gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add Ins 9, 10c, 11, and 12)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pul  | 963, 679. Is for the organiza stop here Diic Support Polic Support Support Polic Support Polic Support Suppo | 608, 526. tion's first, second ercentage (f) divided by line   | 871,112.<br>I, third, fourth, o  | 704,761.   | 724, 485.<br>a section 501(c)(   | 0.<br>0.<br>0.<br>3,872,563.<br>3) ► □             |
| 11<br>12<br>13<br>14<br>Sec<br>15<br>16                    | 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. 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 gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add Ins 9, 10c. 11, and 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Put  | 963, 679. Is for the organiza stop here Dic Support Polic  | 608, 526. tion's first, second ercentage (f) divided by line Part III, line 15   | 871,112.<br>I, third, fourth, o  | 704,761.   | 724, 485.<br>a section 501(c)(   | 0.<br>0.<br>0.<br>3,872,563.<br>3) ► □             |
| 11 12 13 14 Sec 15 16 Sec                                  | 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. 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 gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add ins 9, 10c. 11, and 12.) First five years. If the Form 990 organization, check this box and Public support percentage for 20. Public support percentage from 2.  | 963, 679. Is for the organiza stop here Dic Support Polic Support Polic Support Polic Support Polic Schedule A, estment Incom  | 608, 526. tion's first, second ercentage (f) divided by line Part III, line 15 ne Percentage   | 871, 112.<br>d, third, fourth, o   | 704,761.<br>r fifth tax year as  | 724, 485.<br>a section 501(c)(   | 0.<br>0.<br>0.<br>3,872,563.<br>3) ► □             |
| 11 12 13 14 Sec 15 16 Sec                                  | dividends, payments received on securities loans, rents, royalties and income from similar sources of Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. 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 gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add Ins 9, 10c. 11, and 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 2 tion D. Computation of Invitivestment income percentage for 20.                              | 963, 679. Is for the organiza stop here Dic Support Polic Support Polic Support Polic Support Polic Schedule A, estment Incompression 2012 (line 10c, 10c, 10c, 10c, 10c, 10c, 10c, 10c,   | 608, 526. tion's first, second ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided  | 871, 112.<br>I, third, fourth, o<br>e 13, column (f))<br>by line 13, column  | 704,761.<br>r fifth tax year as  | 724, 485.<br>a section 501(c)(<br>15<br>16   | 0.<br>0.<br>0.<br>3,872,563.<br>3) ► □<br>100.00 % |
| 11<br>12<br>13<br>14<br>Sec<br>15<br>16<br>Sec<br>17<br>18 | dividends, payments received on securities loans, rents, royalties and income from similar sources of Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. 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 gain or loss from the sale of capital assets (Explain in Part IV).  Total support. (Add ins 9, 10c, 11, and 12). First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20. Public support percentage from 2 tion D. Computation of Inv.                                | 963, 679. Is for the organiza stop here Dic Support Polic Support Polic Support Polic Schedule A, estment Incomor 2012 (line 10c, rom 2011 Schedule the organization of the organization organization of the organization of the organization organiza | 608, 526. tion's first, second ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line 1 did not check the I  | 871,112.<br>d, third, fourth, o<br>e 13, column (f))<br>by line 13, column<br>7  | 704, 761. r fifth tax year as mn (f)) nd line 15 is more   | 724, 485. a section 501(c)(  15  16  17  18 e than 33-1/3%, a  | 0.<br>0.<br>0.<br>3,872,563.<br>3)                 |
| 11 12 13 14 Sec 15 16 Sec 17 18 19 a b                     | 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. 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 gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add Ins 9, 10c. 11, and 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 2 tion D. Computation of Inv. Investment income percentage for 33-1/3% support tests — 2012. If | 963, 679. Is for the organiza stop here Dic Support Polic Support Polic Support Polic Support Polic Schedule A, estment Incomport 2012 (line 10c, rom 2011 Schedule the organization of this box and stop the organization of check this box and stop of the organization of check this box and stop of the organization of the organi | 608, 526. tion's first, second ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line 1 did not check the I here. The organia did not check a bo nd stop here. The | 871, 112. If, third, fourth, of third, fourth, of third, fourth, of third, fourth, of third, fourth, of third, and the third third, and the third thir | 704, 761.  r fifth tax year as  mn (f))  nd line 15 is more is a publicly suppone 19a, and line 1 alifies as a publicl | 724, 485. a section 501(c)(  15 16  17 18 e than 33-1/3%, a prited organization by supported organization by supported organization organization organization by supported organization | 0.<br>0.<br>0.<br>3,872,563.<br>3)                 |

| Schedule A | (Form 990 or 990-EZ) 2012   | CLUBCORP                          | CHARITIES,                        | INC.  | <u>7</u> 5-2754798                                | Page 4       |
|------------|---|-----------------------------------|-----------------------------------|---|---|--------------|
| Part IV    | Supplemental Inform<br>Part II, line 17a or 17<br>(See instructions). | ation. Comple<br>b; and Part III, | ete this part to<br>line 12. Also | provide the explanations complete this part for any | required by Part II, line additional information. | 10;          |
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# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

2012

OMB No 1545-0047

Openito Publica

| CLUBCORP CHARITIES, INC.  |   |   |   |                                   |  | Employer identification number 75-2754798 | ation number                       |
|---|---|---|---|-----------------------------------|--|---|------------------------------------|
| General Information on Grants and Assistance  | rants and Assist  | ance  |   |                                   |  |   |                                    |
| Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees the selection criteria used to award the grants or assistance?  Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. | s to substantiate the arrithe grants or assistan<br>procedures for monitoring | tount of the grants or ice?  ig the use of grant fu | ne grants or assistance, the grantees' eligibility for the grants or assistance, and of grant funds in the United States. | ' eligibility for the grants      | or assistance, and   |   | ☐ Yes X No                         |
| <b>Patills Grants and Other Assistance to Governments and Organizations in the United States.</b> Complete if the organization answered 'Ye Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.        | ince to Governme<br>for any recipient   | ents and Organ<br>that received n                   | d Organizations in the United States.   | ted States. Comple                | Complete if the organization answered 'Yes' to e duplicated if additional space is needed. | tion answered 'Y                          | es' to                             |
| 1 (a) Name and address of organization or government  | ( <b>b</b> ) EIN  | (c) IRC section if applicable                       | (d) Amount of cash grant  | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal,   | (g) Description of non-cash assistance    | (h) Purpose of grant or assistance |
|   |   |   |   |                                   | other)   |   |                                    |
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| Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.  | 3) and government o   | rganizations listed i                               | n the line 1 table.   |                                   |  | •   |                                    |
| Enter total number of other organizations listed in the line 1 table  | ions listed in the line   | 1 table .   |   |                                   |  |   |                                    |
| BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.  | s, see the Instruction  | s for Form 990.                                     |   | TEEA3901L 11/30/12                | 11/30/12   | Schedule                                  | Schedule I (Form 990) (2012)       |
|   |   |   |   |                                   |  |   |                                    |

Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other 75-2754798 (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non cash assistance (c) Amount of cash grant INC. (b) Number of recipients CLUBCORP CHARITIES, additional information. (a) Type of grant or assistance Schedule I (Form 990) (2012) Part III Part IV ~ က 4 9 വ

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Schedule I (Form 990) (2012)

#### **SCHEDULE 0** (Form 990 or 990-EZ)

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

| Name of the organization                           | Employer identification number |
|--|--------------------------------|
| CLUBCORP CHARITIES, INC.                           | 75-2754798                     |
| FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PRO  | DCESS                          |
| NO REVIEW WAS OR WILL BE CONDUCTED.                |                                |
| FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DO | CUMENTS PUBLICLY AVAILABLE     |
| NO DOCUMENTS AVAILABLE TO THE PUBLIC.              |                                |
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| Dert 1-11                           | 104667 MM DWC DEG DE Club Transfer (190 of DCC 44       | Description   | Enective Date | Posted Date Entered | בוומים כי |
|-------------------------------------|---|---|---------------|---------------------|-----------|
| 0000 10002                          | C.2 Club Transfers                                      | CATAO UPDOSII - MUM CHIARING CATAON                         | 12-27-11      | 12-29-11 131,277 67 |           |
| 000                                 | 01667 MN RMG CHECKS C2 Club Transfer                    | CK#3150 INI V Rehel Athletic Fund (DAE)                     | 01-12-12      | 01 24 12            | 00 160    |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C2 Club Transfers USD 12- IAN-12    | Ick#3170 Boston College Alimon Association                  | 01-12-12      | 01-24-12            | 4,222 30  |
| 8                                   | 01667 MN RMG CHECKS C2 Club Transfers                   | Ck#3171 Special Olympics of South Carolina                  | 01-12-12      | 01-24-12            | 2 862 30  |
| 8                                   | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3172 Montgomery Area Chamber of Commerce Foundation      | 01-12-12      | 01-24-12            | 2,002,30  |
| 0000 10002                          | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3173 Tampa Bay Watch                                     | 01-12-12      | 01-24-12            | 364 50    |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3174 For OC Kids Neurodevelopmental Center               | 01-12-12      | 01-24-12            | 7 229 49  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3175 Village of Hope                                     | 01-12-12      | 01-24-12            | 30.957 94 |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3176 Friends of Island Parks                             | 01-12-12      | 01-24-12            | 1,21140   |
| 0000 10002                          | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3178 Make A Wish Foundation of the Mid-South             | 01-12-12      | 01-24-12            | 331 50    |
| 0000 10002                          | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3179 Have A Ball Foundation                              | 01-12-12      | 01-24-12            | 10,082 69 |
| 0000 10002                          | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3180 United Rehabilitation Services                      | 01-12-12      | 01-24-12            | 985 50    |
| 0000 10002                          | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3181 Dreams Come True                                    | 01-12-12      | 01-24-12            | 82 50     |
| 0000 10002                          | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3182 Hot Springs & Hot Springs Village Symphony Guild    | 01-12-12      | 01-24-12            | 2,949 00  |
| 0000 10002                          | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3183 A Glimmer of Hope                                   | 01-12-12      | 01-24-12            | 989 25    |
| 0000 10002                          | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3184 Helping in His Name Food Pantry                     | 01-12-12      | 01-24-12            | 2,097 71  |
| 0000 10002                          | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3185 Twin Lakes Food Bank                                | 01-12-12      | 01-24-12            | 1,016 10  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3186 Zonta Club of Charleston                            | 01-12-12      | 01-24-12            | 4,976 23  |
| 0000 10002                          | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3187 Scott C Wolfenbeger Foundation, LLC                 | 01-12-12      | 01-24-12            | 1,402 50  |
| 0000 10002                          | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3188 Solice for Stephanie                                | 01-12-12      | 01-24-12            | 2 892 00  |
| 0000 10002                          | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3189 Rainbows for All Children                           | 01-12-12      | 01-24-12            | 6,495 59  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3190 Reality Changers                                    | 01-12-12      | 01-24-12            | 8 583 41  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3191 Kansas City Crusaders                               | 01-12-12      | 01-24-12            | 4,361 67  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3192 Friends of Gwinnett County Senior Services          | 01-12-12      | 01-24-12            | 3,838 20  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3193 Rally For The Cure                                  | 01-12-12      | 01-24-12            | 10,646 24 |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3194 Forbes House  | 01-12-12      | 01-24-12            | 5.013 29  |
| 01667 0000 10002 20000              |   | ck#3195 North County Solutions for Changes                  | 01-12-12      | 01-24-12            | 1,517 33  |
| 01667 0000 10002 20000              | ٦)  | ck#3196 The Boys & Girls Clubs of South Oakland County      | 01-12-12      | 01-24-12            | 1.815 90  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3197 Make-A-Wish Foundation of Georgia and Alabama       | 01-12-12      | 01-24-12            | 582 00    |
| 0000 10002                          | 21  | ck#3198 The Family Place                                    | 01-12-12      | 01-24-12            | 6,781 49  |
| 0000 10002                          | 01667 MN RMG CHECKS C2 Club Transfers USD 12-JAN-12     | ck#3199 Access College Foundation                           | 01-12-12      | 01-24-12            | 2,085 00  |
| 0000 10002                          |   | ck#3200 Alzheimer's Association                             | 01-20-12      | 01-23-12            | 11,125 26 |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12     | ck#3201 Arizona Family Military Relief Fund                 | 01-20-12      | 01-23-12            | 14,883 59 |
| 0000 10002                          |   | ck#3202 The Ovarian Cancer Institute                        | 01-20-12      | 01-23-12            | 1,611 76  |
| 0000 10002                          |   | ck#3203 American Mobility Foundation                        | 01-20-12      | 01-23-12            | 1,805 25  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12     | ck#3204 Dallas Area Habitat for Humanity                    | 01-20-12      | 01-23-12            | 1,805 25  |
| 0000 10002                          |   | ck#3205 Boys & Girls Clubs of Las Vegas                     | 01-20-12      | 01-23-12            | 3,630 00  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12     | ck#3206 So Others Might Eat (SOME)                          | 01-20-12      | 01-23-12            | 3,240 30  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12     | ck#3207 2011 Japan Relief Fund                              | 01-20-12      | 01-23-12            | 4,993 86  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12     | ck#3208 The Foundation at Mission Regional Medical Center   | 01-20-12      | 01-23-12            | 6,903 59  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12     | ick#3209 Domestic Abuse Council                             | 01-20-12      | 01-23-12            | 184 50    |
| 01667 0000 10002 20000              | 01667 MN KMG CHECKS C1 Club Transfers USD 20-JAN-12     | ck#3210 The Houston Health Museum                           | 01-20-12      | 01-23-12            | 1,791 00  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS CT CIUD Iransiers USD 20-JAN-12     | CK#3211 Community Pride Unite Care Center of Clearwater Inc | 01-20-12      | 01-23-12            | 2,030 32  |
| 01687 0000 10002 20000              | O1007 INIV RING CHECKS OF CIUD TRANSIERS USD 20-3AIV-12 | cr#3212 Gailley Railch Men's Goil Association Chairties     | 01-20-12      | 01-23-12            | 47 7660   |
| 01667 0000 10002 20000              | 101667 MN DWG CHECKS CT CITG HERISTERS USD 20-JAN-12    | SK#3213 HOMES TOLOUR TROOPS                                 | 01-20-12      | 01-23-12            | 10,012 18 |
| 1000                                |   | other landing your Control                                  | 01.20-12      | 01 23 12            | 1 731 16  |
| 0000 10002                          | 01667 MN RMG CHECKS C1 Club Transfers USD 20- IAN-12    | Ick#3216 Metropolitan Family Services                       | 01-20-12      | 01-23-12            | 10 124 99 |
| 0000 10002                          | 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12     | ck#3217 Outer Banks Community Foundation                    | 01-20-12      | 01-23-12            | 718 14    |
| 0000 10002                          | 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12     | ck#3218 Make-A-Wish Foundation Mid Atlantic Chapter         | 01-20-12      | 01-23-12            | 2,161 20  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12     | ck#3219 Play for P i N K                                    | 01-20-12      | 01-23-12            | 12,343 49 |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12     | ck#3220 David Toms Foundation                               | 01-20-12      | 01-23-12            | 2,198 10  |
| 0000 10002                          | 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12     | ck#3222 Frisco Family Services                              | 01-20-12      | 01-23-12            | 9,234 89  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12     | ck#3223 First Tee of Greater Sacramento                     | 01-20-12      | 01-23-12            | 831 00    |
| 0000 10002                          | Club Transfers USD                                      | ck#3224 Humble Area Assistance Ministries                   | 01-20-12      | 01-23-12            | 8,505 29  |
| 0000 10002                          | 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12     | ck#3225 Treesdale Employee Scholarship Fund                 | 01-20-12      | 01-23-12            | 7,273 19  |
| 01667 0000 10002 20000              | 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12     | ick#3226 University of Massachusetts Club Scholarship Fund  | 01-20-12      | 01-23-12            | 7,205 99  |
| Dar01-13 101667 10000 110003 120000 | 101667 MN RMG CHECKS C1 Clin Transfers LIST 20- IAN-12  | CX#3007 Brookwood Committee                                 | 2, 20, 13     | - 07.00             |           |

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| 1,038 00  | 93 00  |   | . 80 00   | 14,883 59   | 00.00  | 7 617 16  | 01 20   | 1 621 50  | 2 825 10  | 1 264 50  | 00 000  | 2 102 16  | 3 326 40  | 19 157 98   | 1 204 50   | 633 00  | 2,278 36  | 8,679 16  | 906 35  | 7,425 29   | 3,655 50  | 3,355 20  | 800 56   | 1,351 20  | 1,135 50  | 5,821 49   | 3,165 00  | 1,601 66  | 150 00  | 125 12   | 786 14  | 100/   |  | 2,470 94  | 4,410 30  | 2,175 00  |  | 15 00  | 0.10   | 00 30                            | 25 00                                 |  | 25 00   | 20 00   | 15 00   | 20 00   | 61 25   | 40 00   | 24 95  | 0 573 32  | 9 161 68                                     |  |  | 4,384 80  | 1,710 20  |
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|   |  | 147,056 79  |   | 2,000,1   | 14,883 59  |   |   |   |   |   |   |   |   |   |  |   |   |   |   |  |   |   |  |   |   |  |   |   |   |  |   | 86 217 78  | 6.855 29   |   |   |   | 15 00  |  | 5  | 2                                |                                       | 2,375 00   |   |   |   |   |   |   | 16 360 00  | 00 000  |  | 2.050 00   | 4,045 00   |   |   |
| 01-23-12  | 01-23-12   | 01-24-12  | 01-24-12  | 02-20-12  | 02-20-12   | 02-20-12  | 02.20.12  | 02-20-12  | 02-20-12  | 02-20-12  | 02-20-12  | 02-20-12  | 02-20-12  | 02-20-12  | 02-20-12   | 02-20-12  | 02-20-12  | 02-20-12  | 02-20-12  | 02-20-12   | 02-20-12  | 02-20-12  | 02-20-12   | 02-20-12  | 02-20-12  | 02-20-12   | 02-20-12  | 02-20-12  | 02 20 42  | 02-20-12   | 02-20-12  | 02-20-12   | 02-20-12   | 02-20-12  | 02-20-12  | 02-20-12  | 02-20-12   | 02-20-12   | 02-20-12   | 03-16-12                         | 03-16-12                              | 03-16-12   | 03-17-12  | 04-16-12  | 04-16-12  | 04-16-12  | 04-16-12  | 04-16-12  | 04-16-12   | 05-09-12  | 05-09-12                                     | 05-17-12   | 05-17-12   | 05-17-12  | 05-17-12  |
| 01-20-12  | 01-20-12   | 01-24-12  | 01-24-12  | 01-30-12  | 02 07 12   | 02-07-12  | 02-07-12  | 02-07-12  | 02-07-12  | 02-07-12  | 02-07-12  | 02-07-12  | 02-07-12  | 02-07-12  | 02-07-12   | 02-07-12  | 02-07-12  | 02-07-12  | 02-07-12  | 02-07-12   | 02-07-12  | 02-07-12  | 02-07-12   | 02-07-12  | 02-07-12  | 02-07-12   | 02-07-12  | 21-/0-20  | 02.07.12  | 02-07-12<br>02-08-12                                 | 02-17-12  | 02-20-12   | 02-20-12   | 02-20-12  | 02-20-12  | 02-20-12  | 02-20-12   | 02-20-12   | 02-20-12   | 03-01-12                         | 03-01-12                              | 03-16-12   | 03-19-12  | 03-27-12  | 03-27-12  | 03-27-12  | 04-10-12  | 04-10-12  | 04-11-12   | 05-01-12  | 05-01-12                                     | 05-08-12   | 05-08-12   | 05-08-12  | 05-08-12  |
| ck#3228 Belton Christian Youth Center               | ck#3229 Special Olympics Greater Houston Area 4      | 101/19 deposit - MDA Charity Classic                | CK#3196 UC Treasurer                                | Void ck#3201 Austra Earth Miller, Defect Cond         | control of the state of the sta | Ck#3232 Rolary Club of Buford / North Gwonett       | ck#3233 Rolary Club of Hendersonville               | ck#3235 Wounded Warriors Family Support             | ck#3236 Family Promise of Knoxville                 | ck#3237 Safehouse Outreach                          | ck#3238 Hilton Head Humane Society                  | ck#3239 YMCA of the Desert                          | ck#3240 Boys & Girls Club of Boerne                 | ck#3241 Ronald McDonald House of Akron              | ck#3242 Ronald McDonald House of North Central Florida | ck#3243 American Cancer Society                     | ck#3244 Florida Suncoast Affilate of Susan G Komen  | ck#3245 Martha's Village and Kitchen                | ck#3246 Will Davison Memorial Scholarship Fund      | ck#3247 Palm Desert High School Sports Boosters      | ck#3249 Azalea Charities                            | ck#3250 YOSA  | ck#3251 Keystone Hospice The George Fund             | ck#3252 Susan G Komen                               | ck#3253 Burkhart Center for Autism Education and Research | ck#3254 Camp Adventure - American Cancer Society     | ck#3255 The Darrell Green Youth Life Foundation     | CAROZOG OCO BOBIO OI GOVERNOS Academic Award        | ok#3258 Jane Adams School of Business               | ck#3259 Commonwealth of Massachusetts                | ck#3260 VCU Massy Cancer Center                     | 01/26 deposit - MDA Charity Classic              | 02/17 deposit - MDA Charity Classic              | ck#3261 Our House Grief Support Center              | ck#3262 Country Club of the South Charily Guild     | ck#3263 Homeless Children's Education fund          | r/c 12/23 dep - refund check State of CA               | ric 12/23 dep - retund check State of CA                 | ric charty classic variance                            | ck#3264 Commonwealth of Virginia | ck#3265 California Secretary of State | 03/15 deposit                                    | ck#3266 Office of the Attorney General              | ck#3267 Tennessee Secretary of State                | ck#3268 Dept of Financial Institutions              | ck#3269 Georgia Secretary of State                  | ck#3270 Florida Dept of State                       | ck#3271 Kansas Secretary of State                   | OAMA denocit                                     | ick#3273 Indian Wells CC                            | ck#3274 Elsenhower Medical Center Foundation | 05/08 deposit                                    | 05/08 deposit                                    | ck#3275 Neuse Golf Club                             | tck#3276 Rally For The Cure                         |
| 01667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12 | 101667 MN RMG CHECKS C1 Club Transfers USD 20-JAN-12 | O1667 MN DMC CHECKS C3 Click Trooping 180 24 140 13 | O1667 MN RMG CHECKS C2 Club Transfers USD 24-JAN-12 | 101667 MN RMG CHECKS C2 Club Transfers LISD 30-1AN-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FFB-12  | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12    | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 101667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 0166/ MN KMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01007 MIN RIMG CHECKS CT Club Transfers USD 07-PEB-12 | 01957 MIN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN KMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12       | 101667 MN RMG CHECKS C1 Club Iransfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 07-FEB-12 | 01667 MN RMG CHECKS C1 Club Transfers 130 07-EER-12 | 01667 MN RMG CHECKS C1 Club Transfers 13D 07-FFB-12 | 101667 MN RMG CHECKS C5 Club Transfers USD 08-FEB-12 | 01667 MN RMG CHECKS C3 Club Transfers USD 17-FEB-12 | 01667 MN RMG DEP D1 Club Transfers USD 20-FEB-12 | 01667 MN RMG DEP D1 Club Transfers USD 20-FEB-12 | 01667 MN RMG CHECKS C4 Club Transfers USD 20-FEB-12 | 01667 MN RMG CHECKS C4 Club Transfers USD 20-FEB-12 | 01667 MN RMG CHECKS C4 Club Transfers USD 20-FEB-12 | 101667 MN RMG Adjustments Club Transfers USD 20-FEB-12 | 01907 Mily King Adjustments Club Transfers USD 20-FEB-12 | 101667 MN RMG Adjustments Club Transfers USD 20-FFB-12 |                                  |                                       | 01667 MN RMG DEP D1 Club Transfers USD 16-MAR-12 | 01667 MN RMG CHECKS C2 Club Transfers USD 19-MAR-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 27-MAR-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 27-MAR-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 27-MAR-12 | 01667 MN KMG CHECKS CZ Club Transfers USD 10-APR-12 | 01667 MN RMG CHECKS C2 Club Transfers USD 10-APR-12 | 01667 MN RMG DEP D1 Clib Transfers USD 16-APR-12 | 01667 MN RMG CHECKS C1 Club Transfers USD 01-MAY-12 |  | 01667 MN RMG DEP D1 Club Transfers USD 08-MAY-12 | 01667 MN RMG DEP D1 Club Transfers USD 08-MAY-12 | 01667 MN RMG CHECKS C3 Club Transfers USD 08-MAY-12 | 01667 MN KMG CHECKS C3 Club Transfers USD 08-MAT-12 |
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| Per01-12  | Per01-12   | Per01-12  | Per02-12  | Per02-12  | Per02-12   | Per02-12  | Per02-12  | Per02-12  | Per02-12  | Per02-12  | Per02-12  | Per02-12  | Per02-12  | Per02-12  | Per02-12   | Per02-12  | Per02-12  | Per02-12  | Per02-12  | Per02-12   | Per02-12  | Po-02 12  | Perfor 12  | Per02-12  | Per02-12  | Per02-12   | Per02-12  | Per02-12  | Per02-12  | Per02-12   | Per02-12  | Per02-12   | Per02-12   | Per02-12  | Per02-12  | Per02-12  | Per02-12   | Per02-12   | Per02-12   | Per03-12                         | Per03-12                              | Per03-12   | Per03-12  | Per04-12  | Per04-12  | Per04-12  | Fer04-12  | Per04-12  | Per04-12   | Per05-12  | Per05-12                                     | Per05-12   | Per05-12   | Per05-12  | Per05-12  |

| 20 00                         |                   |   |  |                          |                           |  | 10 00                             | 300 000                               | 24 00                                   | 15 00                                   | 35 00                                 | 7500  | 0001                                  | 00 007                               | 200 00                                     | 250 00  | 00000  | 00 67                                  | 00 00                                  | 0000                                   | 900                                   | 8 9                                    | 00 2                                   | 7200                                  | 000                                    | 00 01  | 8,618 30  | 1,000 00  | 21 77  |  |   | 300 00  | 2000                      | 3                        |  |                         | 2,784 00                              | 2,641 00                              | 16,064 85                             | 21,688 49                             | 3,291 32              | 2,520 90                              | 8,897 99   | 5,898 49                               | 2,201 16                               | 13,214 09                              | T                                     | 3 180 00                   | 2.285 00  | 1,737 00             | 45 89                    |   |                             | 10 00                                 | 2 550 00   | 55,486 16                              |
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| •                             | 1,300 00          |   | 1,661 00   | 4,957 50                 | 1,000 00                  | 3,000 00   |                                   |                                       |   |   |                                       |   |                                       |                                      |  |   |  |  | 1                                      | -                                      | -                                     | +                                      | 1                                      |                                       |  |  |   |   | 500 40   | 10.00  | 00 004                                    | 2000  |                           | 5.425.00                 | 1.980 00                               | 3,555 00                |                                       |                                       |                                       |                                       |                       |                                       | +  |  | 1                                      | 00 000                                 | 1052 00                               | 00 00                      |   |                      |                          | 74,557 09                                       | 40,875.35                   | 70 000 37                             | 12,029,61  |  |
| 05-17-12                      | 07-05-12          | 07-10-12                                    | 07-10-12   | 07-10-12                 | 07-10-12                  | 07-10-12   | 21-11-70                          | 07.11-12                              | 21-11-70                                | 07-11-12                                | 07-11-12                              | 07-11-12  | 07.11-12                              | 21-11-10                             | 21-11-70                                   | 07-11-12  | 07-11-12   | 07.27.42                               | 21-17-10                               | 07 27 42                               | 07 27 12                              | 07 27 42                               | 07 27 42                               | 21-12-10                              | 21-72-70                               | 21-77-10   | 21-77-10  | 07-27-12  | 07 27 42                                       | 07-27-12                                       | 08-15-12                                  | 09-06-12  | 09-27-12                  | 10-08-12                 | 11-03-12                               | 11-03-12                | 11-03-12                              | 11-03-12                              | 11-27-12                              | 11-27-12                              | 11-27-12              | 11-27-12                              | 11-27-12   | 11-2/-12                               | 11-77-17                               | 11.27-12                               | 11 26 12                              | 11-27-12                   | 11-27-12  | 11-27-12             | 11-27-12                 | 11-27-12  | 11-27-12                    | 21-2/-12                              | 12-26-12   | 12-26-12                               |
| 05-11-12                      | 07-02-12          | 07-10-12                                    | 07-10-12   | 07-10-12                 | 07-10-12                  | 07-10-12   | 21-01-70                          | 27-10-12                              | 21-01-70                                | 07-10-12                                | 07-10-12                              | 07-10-12  | 07-10-12                              | 07-10-12                             | 07-10-12                                   | 21-01-70  | 07-10-12   | 07 27 43                               | 21-77-10                               | 07 27 42                               | 07.27.12                              | 07 27 42                               | 07 27 12                               | 07-77-12                              | 07-72-12                               | 07-27-12   | 07 27 12  | 07-27-12  | 07 27 13                                       | 07-27-12                                       | 08-14-12                                  | 09-04-12  | 09-27-12                  | 10-02-12                 | 10-30-12                               | 10-30-12                | 10-30-12                              | 10-30-12                              | 11-14-12                              | 11-14-12                              | 11-14-12              | 11-14-12                              | 11-14-12   | 11-14-12                               | 11-14-12                               | 11-14-12                               | 11 26 12                              | 11-26-12                   | 11-26-12  | 11-26-12             | 11-27-12                 | 11-27-12  | 11-27-12                    | 21-72-11                              | 12-05-12   | 12-07-12                               |
| ck#3277 SC Secretary of State | Tund CC CHAMILIES | 105/29 deposit - Charity Classic 2011 event | 106/29 deposit - Lochmere                              | 06/29 deposit - Lochmere | U6/29 deposit - Treesdale | U//10 deposit - Lochmere                               | CK#32/8 Himois Secretary of State | CK#3200 Termessee Secretary of State  | CK#326 Uept of Regulation and Licensing | CK#3282 Illinois Charity Bureau Fun     | ck#3283 Kansas Secretary of State     | CX#3284 Allorney General's Registry of Charitable Trust | CHASSE Commented to Department        | CAMPOSO COMMUNICATION PERMISSIVATINA | CK#3267 NO DEPLOY (I'VE SECRETARY OF STATE | ck#3266 freasurer of virginia                         | CA#3209   Lectural Coll and County City Scholarship Fund, Inc. | ch#2001 WA Secretary of Clate          | CHROSOL Manuscrips Consolar of Chris   | CATACON MISSISSIPPI SECRETARY OF STATE | ch#304 Indiana Secretary of State     | ch#2205 Arizona Corporation Commession | Att 2008 Manada Constitution Collinson | ch#3230 Nevada Secretary of State     | ck#329/ liimois Secretary of State     | CAMASSO CIUDONI (Cuidiano Cilaniane Solicilations Illings) | Attagon to the cult                                     | ck#3300 Localitete Coll Citto Ck#3301 Jane Adams School of Business (replace ck#3258) | eton pay ch#1258 lang Adams School of Disciose | Stop pay CK#3200 Jane Adams School of Business | find CC CHARITIES                         | ck#3302 Florida Dent of Apriculture and Consumer Services | ck#3303 State of Michigan | 10/02 deposit - Lochmere | 10/25 deposit - Oakmont                | 10/25 deposit - Oakmont | ck#3304 Neuse Golf club               | ck#3306 Clayton EMS                   | ck#3307 American Heart Association    | ck#3308 The Jim Utley Foundation      | ck#3309 Aısy's Angels | ck#3310 Solice for Stephanie          | ck#3311 Humble Area Assistance Ministries            | CK#3312 Rolary of Kancho Mirage        | CK#3313 Kotary Cido of New Tampa       | 1477 Appeal Lothage                    | 11/21 deposit Oct Contract            | ck#3316 Rally for the Cure | ck#3317 Lochmere Golf Club                            | ck#3318 Saving Grace | 10/12 service charge fee | 10/23 wire - MDA for Charity Classic 2012 event | 10/25 wire - Greater Giving | CK#3315 Washington Secretary of State | ck#3320 Oakmont Country Club                         | ck#3321 San Jose Children's Musical    |
| T                             | Ť                 | Т   | 01667 MN RMG DEPOSITS 001 Club Transfers USD 10-JUL-12 | Т                        | Т                         | O1667 MIN BMC CHECKS 604 OLIND FRANSFERS USD 10-JUL-12 | Τ                                 | 01667 MN BMG CHECKS 001 Club Transfer | Τ                                       | 01667 MIN RING CHECKS 001 CIUD Transfer | 01667 MN RMG CHECKS 001 Club Transfer | T   | 01667 MN RMG CHECKS 001 Club Transfer | Ţ                                    | O1667 MN BMC CHECKS 001 Club Transfer      | 101667 MN BMG CHECKS 001 Club Iransfers 050 10-30C-12 | 01667 MN RMG CHECKS 001 Club Transfer                          | 01667 MN RMG CHECKS 001 Club Transfers | 01667 MN RMG CHECKS 001 Club Transfers | 01667 MN RMG CHECKS 001 Club Transfers | 01667 MN RMG CHECKS 001 Club Transfer | 01667 MN RMG CHECKS 001 Club Transfer  |  | 01667 MN DMG CHECKS 001 Club Transfer | 01667 MN BMG CHECKS 001 Club Transfers | 01667 MN BMG CHECKS 005 Club Transfer                      | O1667 MN RMC CHECKS ONS Club Transfers 1180 27, 1111 12 | 01667 MN RMG CHECKS 003 Club Transfers  | 01667 MN RMG CHECKS 003 Club Transfers         | 01667 MN RMG CHECKS 004 Club Transfers         | 00555 MN NMV Club Transfers USD 14-At IG- | 01667 MN RMG CHECKS 001 Club Transfers                    |                           |                          | 01667 MN RMG DEPOSITS 001 Club Transfi | П                       | 01667 MN RMG CHECKS 003 Club Transfer | 01667 MN RMG CHECKS 003 Club Transfer | 01667 MN RMG CHECKS 002 Club Transfer | 01667 MN RMG CHECKS 002 Club Transfer | T                     | 01667 MN RMG CHECKS 002 Club Transfer | 01667 MN RMG CHECKS 002 Club Transfers USD 14-NOV-12 | O1667 MN GMC CHECKS 002 CIUD I TROESER | O1667 Min DMC CHECKS 002 Club Transfer | 101667 MN BMC DEBOSITE 001 Club Troops | Otest AN BMC DEPOSITS OUT CLUB ITERES | Т                          | 101667 MN RMG CHECKS 003 Club Transfers USD 26-NOV-12 | Г                    | П                        | П   | Т                           | Т                                     | 01667 MN RMG CHECKS 004 Club Transfers USD 05-DEC-12 | 01667 MN RMG CHECKS 003 Club Transfers |
| 01667 0000 10002 00301        | 0000              | 2000 1000                                   | 20001 0000   | 2000 10000               |                           | 01667 0000 10002 01383                                 | 0000                              | 0000 10002                            | 0000                                    | 0000 10000                              | 01567 0000 10002 00301                |   | 0000 10000                            | 0000 10002                           | 0000                                       | 0000  | 0000 10002   | 0000 10002                             | 1000                                   | 0000 10002                             | 0000 10002                            | 10007                                  |  | 0000 10002                            | 0000                                   | 0000 10002   | 101667 0000 10002 01595                                 | 0000 10002  | 0000 10002                                     | 0000 10002                                     | 0000 10002                                | 01667 0000 10002 00301                                    | 0000 10002                | 0000 10002               | 0000 10002                             | 0000 10002              | 01667 0000 10002 01596                | 0000 10002                            | 0000 10002                            | 0000 10002                            | 0000 10002            | 0000 10002                            | 0000 10002   | 01667 0000 10002 20000                 | 0000 10002                             | 0000 10002                             | 10002                                 |                            |   | 0000 10002           | 01667 0000 10002 00301   | 0000 10002                                      | 0000 10002                  |                                       | 101667 0000 10002 00238                              | 0000 10002                             |
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| ck#3322 O'Connor Hospital Foundation   |
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|  |
| 01667 Min RMG CHECKS 002 Club Transfers USD 17-DEC-12 Ck#3324 Family Health Center   |
| 01667 MN RMG CHECKS 002 Club Transfers USD 17-DEC-12   ck#3325 The Foundation of SJRMC   |
| USD 17-DEC-12 ck#3326 Spirit Horse Therapeutic Riding Center   |
| 01667 MN RMG CHECKS 002 Club Transfers USD 17-DEC-12 ck#3327 Rainbows for Children   |
| 01667 MN RMG CHECKS 002 Club Transfers USD 17-DEC-12 ck#3328 Hospice Care of the Lowcountry                                    |
| USD 17-DEC-12 ck#3329 Texas Childrens Hospital   |
| 01667 MN RMG CHECKS 002 Club Transfers USD 17-DEC-12 ck#3330 Operation Oasis   |
| USD 17-DEC-12   ck#3331 American Mobility  |
| 01667 MIN RIMG CHECKS 002 Club Transfers USD 17-DEC-12   ck#3332 Sluart Sunnse Rotary Chantable Foundation                     |
| USD 17-DEC-12   ck#3333 Arts Council of Indianapolis   |
| 01667   0000   10002   20000   01667 MN RMG CHECKS 002 Club Transfers USD 17-DEC-12   ck#3334 Savannah River Cancer Foundation |
| USD 17-DEC-12 ck#3335 The First Tee of Greater Sacramento  |
| 01667 MN RMG CHECKS 002 Club Transfers USD 17-DEC-12   ck#3336 fronman Foundation-Rappstar Challenge                           |
| 01667 MN RMG MISC 001 Club Transfers USD 25-DEC-12 11/14 service charge fee  |
| 01667 MN RMG MISC 001 Club Transfers USD 25-DEC-12 11/14 withdrawal - Greater Givings  |
| 01667 MN RMG DEPOSITS 004 Club Transfers USD 25-DEC-12 12/04 wire - MDA for Charity Classic 2012 event                         |
| D 25-DEC-12 12/13 service charge fee   |
| 01667 MN RMG DEPOSITS 003 Club Transfers USD 25-DEC-12   12/27 wire - MDA for Charity Classic 2012 event                       |
| D 25-DEC-12 stop pay ck# 3301 - Jane Adams School of Business  |

### Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

## Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

| -                                       | re filing for an Automatic 3-Month Extension, o  |  |   |                    |                                      | ×               |
|---|--|--|---|--------------------|--------------------------------------|-----------------|
| •                                       | re filing for an Additional (Not Automatic) 3-Mo   |  |   |                    |                                      | •               |
|   | aplete Part II unless you have already been gran   |  |   |                    |                                      |                 |
| request an e<br>Associated              | filling (e-file). You can electronically file Form & required to file Form 990-T), or an additional (extension of time to file any of the forms listed in Pawith Certain Personal Benefit Contracts, which ling of this form, visit www.irs gov/efile and click  | not automatic<br>art I or Part II i<br>must be sen | <ul> <li>3-month extension of time You can element the exception of Form 8870, Information to the IRS in paper format (see instruct)</li> </ul> | ectroni<br>n Retur | ically file Form<br>In for Transfers | 1 8868 to       |
| Part-I                                  | Automatic 3-Month Extension of Tin   | ne. Only su  | bmit original (no copies needed)  | •                  |                                      |                 |
| A corporation                           | on required to file Form 990-T and requesting a  | n automatic 6                                      | 5-month extension – check this box and  | compl              | ete Part I only                      | ▶[              |
| All other co<br>income tax              | rporations (including 1120-C filers), partnership<br>returns.  | os, REMICs, a                                      | nd trusts must use Form 7004 to reques<br>Enter filer's identi  |                    |                                      |                 |
|   | Name of exempt organization or other filer, see instructions   |  | Enter mer studiu  | <u> </u>           | yer identification n                 |                 |
| Type or                                 |  |  |   |                    |                                      | , ,             |
| print                                   | CLUBCORP CHARITIES, INC.   |  |   | 75-                | 2754798                              |                 |
| File by the                             | Number, street, and room or suite number. If a P O box, se   | e instructions                                     |   |                    | Social security num                  | ber (SSN)       |
| due date for<br>filing your             | 3030 LBJ FREEWAY #600  |  |   |                    |                                      |                 |
| return See<br>instructions              | City, town or post office, state, and ZIP code. For a foreign a  | address, see instri                                | uctions   | -                  |                                      |                 |
|   | DALLAS, TX 75234   |  |   |                    |                                      |                 |
| Enter the Re                            | eturn code for the return that this application is   | for (file a se                                     | parate application for each return) .   |                    |                                      | 01              |
| Application Is For                      |  | Return<br>Code                                     | Application<br>Is For   |                    |                                      | Return<br>Code  |
| Form 990 or                             | Form 990-EZ  | 01   | Form 990-T (corporation)  |                    |                                      | 07              |
| Form 990-B                              |  | 02   | Form 1041-A   |                    |                                      | 08              |
| Form 4720 (ı                            | ndıvıdual)   | 03   | Form 4720   |                    |                                      | 09              |
| Form 990-Pi                             |  | 04   | Form 5227   |                    |                                      | 10              |
|   | (section 401(a) or 408(a) trust)   | 05   | Form 6069   |                    |                                      | 11              |
| Form 990-T                              | (trust other than above)   | 06   | Form 8870   |                    |                                      | 12              |
| Telephon If the org If this is check th | e No • 214-243-6191  ganization does not have an office or place of befor a Group Return, enter the organization's forms box  If it is for part of the group, asion is for.  | FAX No<br>ousiness in th<br>ur digit Group         | e United States, check this box   |                    |                                      |                 |
| until<br>The ex<br>► X                  | st an automatic 3-month (6 months for a corporation 8/15   | ganization re                                      | turn for the organization named above   | al retu            | ırn                                  |                 |
| 3a If this a                            | ange in accounting period application is for Form 990-BL, 990-PF, 990-T, and the scout of the second |  |   | 3-                 |                                      |                 |
| <b>b</b> If this a                      | undable credits See instructions   | 6069, enter a                                      | d.t   | 3 a<br>3 b         | ···                                  | <u>0.</u><br>0. |
| c Balanc                                | e due. Subtract line 3b from line 3a. Include yo<br>(Electronic Federal Tax Payment System) Se   | ur payment v                                       | with this form, if required, by using   | 3 c                | ·· ··-                               | 0.              |
|   | u are going to make an electronic fund withdrawal  |  |   | EO for             |                                      |                 |