



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form <b>990</b>  Department of the Treasury Internal Revenue Service	<b>Return of Organization Exempt From Income Tax</b> <b>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)</b>	OMB No 1545-0047 <div> <div>2012</div> <div>Open to Public Inspection</div> </div>
	▶ The organization may have to use a copy of this return to satisfy state reporting requirements	




<b>A For the 2012 calendar year, or tax year beginning 10-01-2012 , 2012, and ending 09-30-2013</b>			
<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization TIGER WOODS FOUNDATION INC		<b>D</b> Employer identification number  20-0677815
	Doing Business As		
	Number and street (or P O box if mail is not delivered to street address) 1 TIGER WOODS WAY Suite	Room/suite	<b>E</b> Telephone number  (949) 725-3003
	City or town, state or country, and ZIP + 4 ANAHEIM, CA 92801		<b>G</b> Gross receipts \$ 23,305,027
	<b>F</b> Name and address of principal officer RICK SINGER 121 INNOVATION DR SUITE 150 IRVINE, CA 92617		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)  <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (Insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J Website:</b> ▶ www.tigerwoodsfoundation.org			
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation 2004	<b>M</b> State of legal domicile CA

<b>Part I</b>	<b>Summary</b>
---------------	----------------

Activities & Governance	1 Briefly describe the organization's mission or most significant activities Tiger Woods Foundation, a non-profit public benefit corporation, operates school facilities that provide educational opportunities for youth (Activities are specific to 10/1/12 to 9/30/13)			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3	Number of voting members of the governing body (Part VI, line 1a)	28	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	27	
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	62	
	6	Total number of volunteers (estimate if necessary)	85	
7a	Total unrelated business revenue from Part VIII, column (C), line 12	0		
	b Net unrelated business taxable income from Form 990-T, line 34	0		
Revenue			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	4,505,376	3,625,153
	9	Program service revenue (Part VIII, line 2g)	111,150	208,900
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,657,539	4,927,121
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	28,973	51,566
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,303,038	8,812,740
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	467,190	4,260,405
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	3,443,877	3,460,899
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25)	634,434	
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	4,643,332	4,734,756
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	8,554,399	12,456,060
	19	Revenue less expenses Subtract line 18 from line 12	-2,251,361	-3,643,320
	Net Assets or Fund Balances			Beginning of Current Year
20		Total assets (Part X, line 16)	109,463,341	107,134,869
21		Total liabilities (Part X, line 26)	14,360,217	13,240,839
22		Net assets or fund balances Subtract line 21 from line 20	95,103,124	93,894,030

<b>Part II</b>	<b>Signature Block</b>
----------------	------------------------

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

<b>Sign Here</b>	Signature of officer			2014-08-13	
	Rick Singer President Type or print name and title			Date	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name		Preparer's signature		Date
	Firm's name  KPMG LLP			Check <input type="checkbox"/> if self-employed	PTIN
	Firm's address  550 S Hope St Suite 1500 Los Angeles, CA 90071			Firm's EIN  Phone no (213) 972-4000	

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☐

1

Briefly describe the organization's mission

AT THE TIGER WOODS FOUNDATION ("TWF"), WE BELIEVE EVERY CHILD DESERVES THE OPPORTUNITY TO ATTEND COLLEGE DESIGNED TO BREAK THROUGH A CULTURE OF LOW EXPECTATIONS, TWF'S COLLEGE-ACCESS PROGRAMS REACH UNDERSERVED YOUTH IN ALL STAGES OF ACADEMIC LIFE

CONTINUED SCHEDULE O

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a

(Code ) (Expenses \$ 3,944,273 including grants of \$ 0 ) (Revenue \$ 208,900 )

TIGER WOODS LEARNING CENTERS (TWLC) TWLC-FLAGSHIP (ORANGE COUNTY, CA) CREATED IN 2002, THE TIGER WOODS LEARNING CENTER (TWLC) HAS PROVIDED ONE-OF-A-KIND, HANDS-ON ENRICHMENT PROGRAMS FOR YOUTH. THE UNIQUE LEARNING ENVIRONMENT AT THE TWLC WAS INSPIRED BY THE VISION OF TIGER WOODS TO PROVIDE YOUNG PEOPLE WITH A SAFE PLACE TO LEARN, OPPORTUNITIES TO IDENTIFY THEIR INTERESTS, RECOGNIZE THEIR POTENTIAL, AND CREATE POSITIVE CHANGE. THE PROGRAM PHILOSOPHY IS BASED ON POSITIVE YOUTH DEVELOPMENT AND HIGH-QUALITY EDUCATION.

CONTINUED SCHEDULE O

4b

(Code ) (Expenses \$ 6,405,221 including grants of \$ 4,100,455 ) (Revenue \$ 0 )

TIGER WOODS FOUNDATION GRANT-MAKING PROGRAM The Tiger Woods Foundation grant-making program primarily focuses on providing funding to organizations that specialize in education and youth development. Specifically, the grant program serves 501(c)(3) organizations that enhance the learning process for youth. This program supports organizations, programs and projects by invitation only and subject to pre and post qualifications subject to applicable 501(c)(3) guidelines.

4c

(Code ) (Expenses \$ 379,676 including grants of \$ 159,950 ) (Revenue \$ 0 )

EARL WOODS SCHOLARSHIP PROGRAM IN CELEBRATION OF TIGER'S FATHER EARL AND HIS LIFELONG DEDICATION TO HELPING YOUNG PEOPLE ACHIEVE THEIR DREAMS, TWF CREATED THE EARL WOODS SCHOLARSHIP PROGRAM (EWSP). SINCE INCEPTION NEARLY 100 SCHOLARS HAVE MATRICULATED THROUGH THE PROGRAM. SCHOLARS ARE ANNUALLY AWARDED A FOUR-YEAR RENEWABLE SCHOLARSHIP UP TO \$25,000 FOR THE TERM. EWSP HAS APPROXIMATELY 70 CURRENT SCHOLARS INCLUDING 16 NEW SCHOLARS. TO QUALIFY, STUDENTS MUST DEMONSTRATE OUTSTANDING ACADEMIC ACHIEVEMENT, FINANCIAL NEED AND A COMMITMENT TO COMMUNITY.

CONTINUED SCHEDULE O

(Code ) (Expenses \$ 33,300 including grants of \$ 0 ) (Revenue \$ 0 )

COMMUNITY OUTREACH PROGRAMS

4d

Other program services (Describe in Schedule O )

(Expenses \$ 33,300 including grants of \$ 0 ) (Revenue \$ 0 )

















4e

Total program service expenses

10,762,470

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
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	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 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	No
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	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 	13 Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b 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	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> . . . . .	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		No
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . .	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	26	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	62	
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).		Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			No
3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.			
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			No
4b If "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 Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			No
5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
5c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			No
6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
7 Organizations that may receive deductible contributions under section 170(c).			
7a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			No
7b If "Yes," did the organization notify the donor of the value of the goods or services provided?			
7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			No
7d If "Yes," indicate the number of Forms 8282 filed during the year.			
7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			No
7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			No
7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
9 Sponsoring organizations maintaining donor advised funds.			
9a Did the organization make any taxable distributions under section 4966?			
9b Did the organization make a distribution to a donor, donor advisor, or related person?			
10 Section 501(c)(7) organizations. Enter			
10a Initiation fees and capital contributions included on Part VIII, line 12.			
10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.			
11 Section 501(c)(12) organizations. Enter			
11a Gross income from members or shareholders.			
11b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			
12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
13a Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			
13b 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.			
13c Enter the amount of reserves on hand.			
14a Did the organization receive any payments for indoor tanning services during the tax year?			No
14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.			

Part VI

Governance, Management, and Disclosure

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

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	28	
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			
1b	Enter the number of voting members included in line 1a, above, who are independent	27	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
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?	7a	Yes
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	8a	Yes
8b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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	No
10b	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	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	15a	Yes
15b	Other officers or key employees of the organization	15b	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
16b	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 take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	CA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	RICK SINGER 121 INNOVATION DRIVE SUITE 150 IRVINE, CA (949) 725-3003

Check if Schedule O contains a response to any question in this Part VII . . . . . ☒

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

[illegible]



## Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
<b>1b Sub-Total . . . . .</b>										
<b>c Total from continuation sheets to Part VII, Section A . . . . .</b>										
<b>d Total (add lines 1b and 1c) . . . . .</b>								1,060,550	448,226	182,047

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶8

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

## **Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ESIX 3 LLC , 5660 NEW NORTHSIDE DR SUITE 640 ATLANTA GA 30328	INSURANCE BROKER	250,695
MLB ADVANCED MEDIA LP , PO BOX 417171 BOSTON MD 022417171	WEBSITE/MEDIA SVC	200,000
ALGONQUIN ADVISORS LLC , 2 GREENWICH OFFICE PARK 2ND FLOOR GREENWICH CT 06831	INVESTMENT ADVISOR	181,975
KPMG LLP , PO BOX 120001 DALLAS TX 753120939	TAX/AUDIT PREP	138,150
Good Worldwide LLC , 6380 Wilshire Blvd 15th Floor LOS ANGELES CA 90048	ADVERTISING/COMMS	100,000

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►5

Part VIII

Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

			(A)	(B)	(C)	(D)
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	5,248			
	b	Membership dues . . . . .				
	c	Fundraising events . . . . .				
	d	Related organizations . . . .	2,095,375			
	e	Government grants (contributions)				
	f	All other contributions, gifts, grants, and similar amounts not included above	1,524,530			
	g	Noncash contributions included in lines 1a-1f \$	108,246			
	h	Total. Add lines 1a-1f . . . . .	3,625,153			
Program Service Revenue	2a	SUMMER ACADEMY FEES				
		Business Code				
		611600	208,900	208,900		
	b					
	c					
	d					
	e					
	f	All other program service revenue				
Other Revenue	g	Total. Add lines 2a-2f . . . . .	208,900			
	3	Investment income (including dividends, interest, and other similar amounts) . . . . .	2,728,408			2,728,408
	4	Income from investment of tax-exempt bond proceeds . .	0			
	5	Royalties . . . . .	0			
	6a	Gross rents	(i) Real	(ii) Personal		
			1,750			
			1,750	0		
	b	Less rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss) . . . . .	1,750			1,750
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
			16,691,000			
			14,492,287			
	b	Less cost or other basis and sales expenses				
	c	Gain or (loss)	2,198,713			
	d	Net gain or (loss) . . . . .	2,198,713			2,198,713
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .				
		a				
	b	Less direct expenses . . . . .				
	c	Net income or (loss) from fundraising events . . .	0			
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .				
		a				
	b	Less direct expenses . . . . .				
	c	Net income or (loss) from gaming activities . . .	0			
	10a	Gross sales of inventory, less returns and allowances . . . . .				
		a				
	b	Less cost of goods sold . . . . .				
	c	Net income or (loss) from sales of inventory . . .	0			
	Miscellaneous Revenue		Business Code			
	11a	REGISTRATION/ID CARDS	900099	37,905		37,905
	b	VENDING MACHINE	900099	1,357		1,357
	c	MEMBERSHIP REWARDS	900099	6,328		6,328
	d	All other revenue . . . . .		4,226		4,226
	e	Total. Add lines 11a-11d . . . . .	49,816			
	12	Total revenue. See Instructions . . . . .	8,812,740	208,900		4,978,687

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	4,100,455	4,100,455		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	159,950	159,950		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	0			
4	Benefits paid to or for members.	0			
5	Compensation of current officers, directors, trustees, and key employees.	727,390	421,569	138,421	167,400
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7	Other salaries and wages.	2,025,253	1,726,076	134,602	164,575
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	98,171	75,920	9,750	12,501
9	Other employee benefits.	400,084	319,830	34,901	45,353
10	Payroll taxes.	210,001	167,981	18,889	23,131
11	Fees for services (non-employees):				
a	Management.	0			
b	Legal.	4,127	2,970	551	606
c	Accounting.	192,381	9,384	180,933	2,064
d	Lobbying.	0			
e	Professional fundraising services. See Part IV, line 17.	0			
f	Investment management fees.	273,579		273,579	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	133,357	98,188	13,363	21,806
12	Advertising and promotion.	249,932	186,224	22,744	40,964
13	Office expenses.	187,690	138,404	25,137	24,149
14	Information technology.	310,361	228,465	39,972	41,924
15	Royalties.	0			
16	Occupancy.	516,668	466,313	18,646	31,709
17	Travel.	188,321	136,072	26,720	25,529
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19	Conferences, conventions, and meetings.	108,659	81,048	10,462	17,149
20	Interest.	477,885	473,106	4,779	
21	Payments to affiliates.	0			
22	Depreciation, depletion, and amortization.	1,188,140	1,094,849	93,291	
23	Insurance.	188,067	164,223	9,192	14,652
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	PROGRAM EXPENSES	392,046	392,046		
b	TAXES AND FEES	5,628	4,194	512	922
c	LOSS ON ABANDONED ASSETS	2,712		2,712	
d	REALIZED LOSS ON SWAP	285,000	285,000		
e	All other expenses	30,203	30,203		
25	Total functional expenses. Add lines 1 through 24e.	12,456,060	10,762,470	1,059,156	634,434
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response to any question in this Part X

☐

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		1,495	1	1,764
	2	Savings and temporary cash investments		12,649,665	2	9,027,790
	3	Pledges and grants receivable, net		7,621,871	3	5,918,437
	4	Accounts receivable, net		486	4	4,901
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		0	5	0
	6	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		0	6	0
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		85,776	9	48,808
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a18,842,213			
	b	Less accumulated depreciation	10b7,754,595	11,901,886	10c	11,087,618
	11	Investments—publicly traded securities		44,683,505	11	43,649,631
	12	Investments—other securities See Part IV, line 11		30,458,936	12	36,812,052
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets See Part IV, line 11		2,059,721	15	583,868
	16	Total assets. Add lines 1 through 15 (must equal line 34)		109,463,341	16	107,134,869
Liabilities	17	Accounts payable and accrued expenses		368,597	17	337,794
	18	Grants payable		7,500	18	252,835
	19	Deferred revenue		0	19	0
	20	Tax-exempt bond liabilities		10,775,000	20	10,775,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D		0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		0	23	0
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	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		3,209,120	25	1,875,210
	26	Total liabilities. Add lines 17 through 25		14,360,217	26	13,240,839
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		76,733,124	27	77,579,030
	28	Temporarily restricted net assets		18,370,000	28	16,315,000
	29	Permanently restricted net assets		0	29	0
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		95,103,124	33	93,894,030
	34	Total liabilities and net assets/fund balances		109,463,341	34	107,134,869

Part 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	8,812,740
2	Total expenses (must equal Part IX, column (A), line 25) . . . . .	2	12,456,060
3	Revenue less expenses Subtract line 2 from line 1 . . . . .	3	-3,643,320
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	4	95,103,124
5	Net unrealized gains (losses) on investments . . . . .	5	1,208,358
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	1,225,868
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	93,894,030

Part 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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:

Software Version:

EIN: 20-0677815

Name: TIGER WOODS FOUNDATION INC

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
GREGORY T MCLAUGHLIN PRESIDENT/SECRETARY/CEO	25 0 40 0	X		X				121,150	448,226	47,579
MICHAEL D MCKEE CHAIRMAN	1 0 0 0	X		X				0	0	0
RICHARD BAILY DIRECTOR	1 0 0 0	X						0	0	0
SANDRA BARRY DIRECTOR	1 0 0 0	X						0	0	0
RAJ S BHATHAL DIRECTOR	1 0 0 0	X						0	0	0
AVERY BROWN DIRECTOR	1 0 0 0	X						0	0	0
RONALD CONWAY DIRECTOR	1 0 0 0	X						0	0	0
DALE L DYKEMA DIRECTOR	1 0 0 0	X						0	0	0
KARINA HAMILTON DIRECTOR	1 0 0 0	X						0	0	0
PAUL HEGNESS Director	1 0 0 0	X						0	0	0
CHRISTOPHER J HUBMAN DIRECTOR	1 0 0 0	X						0	0	0
GREG JONES DIRECTOR	1 0 0 0	X						0	0	0
DENNIS KUHL DIRECTOR	1 0 0 0	X						0	0	0
ROB LIGHT DIRECTOR	1 0 0 0	X						0	0	0
JERRY E MANDEL DIRECTOR	1 0 0 0	X						0	0	0
JERRY MATTES DIRECTOR	1 0 0 0	X						0	0	0
TIM J RYAN DIRECTOR	1 0 0 0	X						0	0	0
MARK STEINBERG DIRECTOR	1 0 0 0	X						0	0	0
TOM TAIT DIRECTOR	1 0 0 0	X						0	0	0
TODD C THEODORA director	1 0 0 0	X						0	0	0
LEO TUCKER DIRECTOR	1 0 0 0	X						0	0	0
PETER V UEBERROTH DIRECTOR	1 0 0 0	X						0	0	0
BOB WALTOS DIRECTOR	1 0 0 0	X						0	0	0
KUTILDA WOODS director	1 0 0 0	X						0	0	0
ED MACHIR DIRECTOR	1 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jason Mooneyham DIRECTOR	1 0	X						0	0	0
Jonathan Orszag director	1 0	X						0	0	0
Ronald Spears director	1 0	X						0	0	0
MARIAN BERGESON DIRECTOR (THRU 06/2013)	1 0 0 0	X								
ANDY BIELANSKI DIRECTOR (THRU 12/2012)	1 0 0 0	X								
MICHAEL V DRAKE DIRECTOR (THRU 09/2013)	1 0 0 0	X								
MICHAEL P JOHNSON DIRECTOR (THRU 12/2012)	1 0 0 0	X								
SHEILA C JOHNSON DIRECTOR (THRU 01/2013)	1 0 0 0	X								
LAURA SANFORD DIRECTOR (THRU 12/2012)	1 0 0 0	X								
RAY WILKINS DIRECTOR (THRU 02/2013)	1 0 0 0	X								
KATHERINE BIHR EXECUTIVE DIRECTOR	40 0 0 0			X				199,661	0	15,611
JIN C THATCHER VP PROGRAMS & ADMIN, TREASURER	40 0 1 0			X				192,553	0	34,132
MICHELLE S KIM DIR OF STRATEGIC PARTNERS	40 0 0 0					X		128,321	0	8,838
Gyla Bell Director of programs	40 0 0 0					X		112,121	0	10,637
JESSICA J CARBAJAL Dir of develop & Comm Affairs	40 0 0 0					X		100,404	0	29,757
CRISTINA FERNANDEZ DIRECTOR of programs	40 0 0 0					X		103,086	0	20,317
STACY STARK Director of EVENTS	40 0 0 0					X		103,254	0	15,176

SCHEDULE A  
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2012

Open to Public Inspection

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

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

Department of the Treasury  
Internal Revenue Service

Name of the organization  
TIGER WOODS FOUNDATION INC

Employer identification number  
20-0677815

Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☒

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An organization that normally receives (1) more than 33<sup>1</sup>/<sub>3</sub>% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33<sup>1</sup>/<sub>3</sub>% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii)

A family member of a person described in (i) above?

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?
- h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									



Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 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 Public support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 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 business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here . . . . . ▶						

Section C. Computation of Public Support Percentage			
14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14		
15 Public support percentage for 2011 Schedule A, Part II, line 14	15		
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			▶
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			▶
17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization			▶
b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization			▶
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			▶

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15		
16 Public support percentage from 2011 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17		
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶			

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

Facts And Circumstances Test

Explanation

SCHEDULE D  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
TIGER WOODS FOUNDATION INC

Employer identification number  
20-0677815

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)☐ Preservation of an historically important land area☐ Protection of natural habitat☐ Preservation of a certified historic structure☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶\_\_\_\_\_

4

Number of states where property subject to conservation easement is located ▶\_\_\_\_\_

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶\_\_\_\_\_

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ \_\_\_\_\_

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes☐ No

9

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

Part III

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

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

▶\$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X

▶\$ \_\_\_\_\_

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶\$ \_\_\_\_\_

b

Assets included in Form 990, Part X

▶\$ \_\_\_\_\_

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

Cat No 52283D

Schedule D (Form 990) 2012

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

Yes

No

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land			
b	Buildings	11,576,075	2,259,210	9,316,865
c	Leasehold improvements	2,558,720	1,234,160	1,324,560
d	Equipment	3,185,985	2,788,932	397,053
e	Other	1,521,433	1,472,293	49,140
Total.	Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)			11,087,618

Schedule D (Form 990) 2012



<b>Part XI    Reconciliation of Revenue per Audited Financial Statements With Revenue per Return</b>				
<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	10,934,657	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
<b>a</b>	Net unrealized gains on investments . . . . .	<b>2a</b>	1,208,358	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	21,756	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	1,230,114	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	9,704,543	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	-891,803	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	-891,803	
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	8,812,740	
<b>Part XII    Reconciliation of Expenses per Audited Financial Statements With Expenses per Return</b>				
<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	12,143,750	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	21,756	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>		
<b>c</b>	Other losses . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	2,500	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	24,256	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	12,119,494	
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	336,566	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	336,566	
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	12,456,060	

**Part XIII    Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
FIN 48 FOOTNOTE (ASC 740)	SCHEDULE D, PART X, LINE 2	THE FOUNDATION ADOPTED THE PROVISIONS OF ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC 740, INCOME TAXES, WHICH PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX PROVISION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN AND PROVIDES GUIDANCE ON DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, DISCLOSURE, AND TRANSITION. MANAGEMENT ASSERTS THAT NO SUCH UNCERTAIN TAX POSITIONS EXIST REQUIRING ACCRUAL OR DISCLOSURE AT SEPTEMBER 31, 2013 OR 2012.
REVENUE INCLUDED ON FORM 990, NOT ON AUDITED FINANCIAL STATEMENTS	SCHEDULE D, PART XI, LINE 4B	UNREALIZED LOSS ON INTEREST RATE SWAP \$ (1,228,368) MISC. REVENUE REPORTED NETTED AGAINST EXPENSES ON FINANCIAL STATEMENTS \$ 51,566 REALIZED LOSS ON INTEREST RATE SWAP NETTED AGAINST REVENUE ON FINANCIAL STATEMENTS \$ 285,000 ----- TOTAL \$ (891,803)
EXPENSES INCLUDED ON FORM 990, NOT ON AUDITED FINANCIAL STATEMENTS	SCHEDULE D, PART XII, LINE 2D	PRIOR YEAR GRANT REFUND \$ 2,500 EXPENSES INCLUDED ON FORM 990, NOT ON AUDITED FINANCIAL STATEMENTS SCHEDULE D, PART XII, LINE 4B MISC. REVENUE REPORTED NETTED AGAINST EXPENSES ON FINANCIAL STATEMENTS \$ 51,566 REALIZED LOSS ON INTEREST RATE SWAP NETTED AGAINST REVENUE ON FINANCIAL STATEMENTS \$ 285,000 ----- TOTAL \$ 336,566

SCHEDULE E  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Schools

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13,  
or Form 990-EZ, Part VI, line 48.  
► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
TIGER WOODS FOUNDATION INC

Employer identification number  
20-0677815

Part I		YES	NO
<div>1</div> <div>Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?</div>	1	Yes	
	2	Yes	
	3	Yes	
	4a	Yes	
<div>2</div> <div>Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?</div>	4b	Yes	
	4c	Yes	
	4d	Yes	
	5a		No
<div>3</div> <div>Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II</div>	5b		No
	5c		No
	5d		No
	5e		No
<div>4</div> <div>Does the organization maintain the following?</div> <div>a Records indicating the racial composition of the student body, faculty, and administrative staff?</div> <div>b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?</div> <div>c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?</div> <div>d Copies of all material used by the organization or on its behalf to solicit contributions?</div> <div>If you answered "No" to any of the above, please explain If you need more space, use Part II</div>	5f		No
	5g		No
	5h		No
	6a		No
<div>5</div> <div>Does the organization discriminate by race in any way with respect to</div> <div>a Students' rights or privileges?</div> <div>b Admissions policies?</div> <div>c Employment of faculty or administrative staff?</div> <div>d Scholarships or other financial assistance?</div> <div>e Educational policies?</div> <div>f Use of facilities?</div> <div>g Athletic programs?</div> <div>h Other extracurricular activities?</div> <div>If you answered "Yes" to any of the above, please explain If you need more space, use Part II</div>	6b		No
	7	Yes	



**Part III Supplemental Information.** Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

Identifier	Return Reference	Explanation
SCHEDULE E, PART I, LINE 3		THE TIGER WOODS FOUNDATION PUBLICIZED ITS RACIALLY NONDISCRIMINATORY POLICY IN ALL STUDENT APPLICATION FORMS AND THE ORGANIZATION'S WEBSITE

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
TIGER WOODS FOUNDATION INC

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

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

OMB No 1545-0047

2012

Open to Public  
Inspection

Employer identification number  
20-0677815

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . .

24

3

Enter total number of other organizations listed in the line 1 table . . . . .

0

**Part III**

**Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) EWSP - SCHOLARSHIPS TO UNIVERSITY STUDENTS	29	139,450		n/a	n/a
(2) EWSP - INTERNSHIP PROGRAM	19	20,500		N/A	N/A

**Part IV**

**Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
GRANT MONITORING PROCEDURES	FORM 990, SCHEDULE I, PART I, LINE 2	Due to the size of grants made to unrelated charitable organizations, generaLLy under \$25,000, The Foundation relies on pre-grant procedures and inquiries to ensure the grantee organization meets the requirements for approved programmatic areas of funding

Software ID:

Software Version:

EIN: 20-0677815

Name: TIGER WOODS FOUNDATION INC

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Big Brothers & Big Sisters 10210 Greenbelt Road Suite 900 Lanham, MD 20706	53-0190849	501(c)(3)	10,000		n/a	n/a	youth development
Cabin John Volunteer Fire Department9404 Falls Road Potomac, MD 20854	52-0707953	501(c)(3)	7,500		n/a	n/a	COMMUNITY SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Club Foundation8500 River Road Bethesda, MD 20817	52-1642692	501(c)(3)	10,000		n/a	n/a	COMMUNITY support
Yellow Ribbon Fund10415 Armory Avenue Kensington, MD 20895	36-4567583	501(c)(3)	10,000		n/a	n/a	support injured service members

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Boston Red Sox Foundation4 Yawkey Way BOSTON,MA 02215	33-1007984	501(c)(3)	140,000		n/a	n/a	COMMUNITY SUPPORT
Boy Scouts of AmericaBoston Minuteman411 Unquity Road MILTON,MA 02186	04-3184713	501(c)(3)	10,000		n/a	n/a	COMMUNITY SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Connelly School of the Holy Child9029 Bradley Blvd Potomac,MD 20854	52-0743609	501(c)(3)	10,550		n/a	n/a	EDUCATION SUPPORT
Francis Ouimet Scholarship Fund300 Arnold Palmer Blvd NORTON,MA 02766	04-2234126	501(c)(3)	6,600		n/a	n/a	EDUCATION SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Gar-Field High School14000 Smoketown Road WOODBRIDGE,VA 22193	54-6001533	PRNC WILLM CTY	12,000		n/a	n/a	EDUCATION SUPPORT
Golf Fights Cancer300 Arnold Palmer Blvd NORTON,MA 02766	54-6001533	501(c)(3)	15,000		n/a	n/a	COMMUNITY SUPPORT



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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hockomock Area YMCA300 Elmwood Street North ATTLEBORRO, MA 02760	04-2131749	501(c)(3)	30,000		n/a	n/a	COMMUNITY SUPPORT
Joslin Diabetes CenterOne Joslin Place BOSTON,MA 022155306	04-2203836	501(c)(3)	5,390		n/a	n/a	COMMUNITY SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mansfield High School250 East Street MANSFIELD,MA 02048	04-6001209	TOWN MANSFILED	10,000		n/a	n/a	COMMUNITY SUPPORT
Massachusetts Golf Association300 Arnold Palmer Blvd NORTON,MA 02766	04-2487562	501(c)(3)	40,000		n/a	n/a	COMMUNITY SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Norton Public Schools64 West Main Street NORTON, MA 02766	04-6001252	TOWN OF NORTON	10,000		n/a	n/a	COMMUNITY SUPPORT
Sbonelo Scholarship Foundation5605 Carnegie Blvd CHARLOTTE, NC 28209	26-1822173	501(c)(3)	10,000		n/a	n/a	EDUCATION SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The First Tee Montgomery County1551 Beacon Hill Drive SALINAS,CA 93905	26-0015069	501(c)(3)	25,000		n/a	n/a	COMMUNITY SUPPORT
The Shepherd FoundationPO Box 50 Kensington,MD 20895	52-1613402	501(c)(3)	10,000		n/a	n/a	COMMUNITY SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Town of MansfieldSix Park Row Mansfield,MA 02048	04-6001209	TOWN MANSFIELD	55,000		n/a	n/a	COMMUNITY SUPPORT
Town of Norton70 East Main Street NORTON,MA 02766	04-6001252	TOWN OF NORTON	55,000		n/a	n/a	COMMUNITY SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US Challenge Cup JR GOLF FOUNDATION21 Agnes StreetEAST PROVIDENCE,RI 02914	22-3019734	501(c)(3)	20,000		n/a	n/a	YOUTH RECREATION SUPPORT
Tiger Woods Charity Event Corporation121 Innovation DriveIRVINE,CA 92617	06-1554474	501(c)(3)	3,500,000		n/a	n/a	community support

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA of Attleboro63 North Main Street Attleboro, MA 02703	04-2255819	501(c)(3)	30,000		n/a	n/a	COMMUNITY SUPPORT
Rodman Ride for Kids10 Lincoln Place Foxboro,MA 02035	04-3329283	501(c)(3)	6,000		n/a	n/a	COMMUNITY SUPPORT

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
TIGER WOODS FOUNDATION INC

Employer identification number  
20-0677815

Part I

Questions Regarding Compensation

	Yes	No
<div>1a</div> <div>Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items</div> <div><div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div><div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div></div>		
<div>b</div> <div>If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</div>	1b	
<div>2</div> <div>Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</div>	2	
<div>3</div> <div>Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III</div> <div><div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div></div><div><div><input type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div></div>		
<div>4</div> <div>During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization</div>		
<div>a</div> <div>Receive a severance payment or change-of-control payment?</div>	4a	No
<div>b</div> <div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div>	4b	No
<div>c</div> <div>Participate in, or receive payment from, an equity-based compensation arrangement?</div> <div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</div>	4c	No
<div></div> <div>Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.</div>		
<div>5</div> <div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</div>		
<div>a</div> <div>The organization?</div>	5a	No
<div>b</div> <div>Any related organization?</div> <div>If "Yes," to line 5a or 5b, describe in Part III</div>	5b	No
<div>6</div> <div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</div>		
<div>a</div> <div>The organization?</div>	6a	No
<div>b</div> <div>Any related organization?</div> <div>If "Yes," to line 6a or 6b, describe in Part III</div>	6b	No
<div>7</div> <div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III</div>	7	No
<div>8</div> <div>Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</div>	8	No
<div>9</div> <div>If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</div>	9	



**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)GREGORY T MCLAUGHLIN PRESIDENT/SECRETARY/CEO	(i)	121,150	0	0	10,000	0	131,150	0
	(ii)	256,244	162,859	29,123	0	37,579	485,805	0
(2)KATHERINE BIHR EXECUTIVE DIRECTOR	(i)	150,114	38,000	11,547	7,986	7,625	215,272	0
	(ii)	0	0	0	0	0	0	0
(3)JIN C THATCHER VP PROGRAMS & ADMIN, TREASURER	(i)	148,893	35,000	8,660	7,751	26,381	226,685	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Compensation from Related Organizations		THE PRESIDENT, SECRETARY AND CEO, GREGORY T MCLAUGHLIN WHO RESIGNED IN JUNE 2014, WAS COMPENSATED THROUGH TIGER WOODS FOUNDATION, INC , AND A RELATED 501(C)(3) ORGANIZATION, TIGER WOODS CHARITY EVENT CORPORATION, WHERE HE DEVOTED A COMBINED TOTAL OF 65 HOURS per week IN CONJUNCTION WITH HIS DUTIES AS PRESIDENT AND CEO OF THE TIGER WOODS FOUNDATION, HE OVERSAW ALL FIVE TIGER WOODS LEARNING CENTERS AND ALL THE NATIONAL SCHOLARSHIP PROGRAMS

Schedule K  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
TIGER WOODS FOUNDATION INC

Employer identification number  
20-0677815

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A CALIFORNIA MUNICIPAL FINANCE AUTHORITY	20-1563466	1309114R8	04-05-2013	10,775,000	SEE PART VI		X	X			X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired	0							
2	Amount of bonds legally defeased	0							
3	Total proceeds of issue	10,775,000							
4	Gross proceeds in reserve funds	0							
5	Capitalized interest from proceeds	0							
6	Proceeds in refunding escrows	0							
7	Issuance costs from proceeds	0							
8	Credit enhancement from proceeds	0							
9	Working capital expenditures from proceeds	0							
10	Capital expenditures from proceeds	0							
11	Other spent proceeds	10,775,000							
12	Other unspent proceeds	0							
13	Year of substantial completion	2013							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?	X							
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X						

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 %		%		%		%	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	%		%		%		%	
6	Total of lines 4 and 5	%		%		%		%	
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?		X						
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X							

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X						
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?	X							
b	Exception to rebate?								
c	No rebate due?								
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	X							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X							
b	Name of provider	bank of america							
c	Term of hedge	15							
d	Was the hedge superintegrated?		X						
e	Was a hedge terminated?		X						

Part IV

Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b	Name of provider	0							
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X						
7	Has the organization established written procedures to monitor the requirements of section 148?		X						

Part V

Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		X						

Part VI

Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

Identifier	Return Reference	Explanation
SCHEDULE K, PART I, COLUMN (F)	0	REFINANCED THE OUTSTANDING PRINCIPAL OF THE CALIFORNIA STATEWIDE COMMUNITIES DEVELOPMENT AUTHORITY VARIABLE RATE DEMAND REVENUE BONDS (TIGER WOODS LEARNING CENTER FOUNDATION) SERIES 2006 (THE "REFUNDED BONDS") WHICH WERE ISSUED TO PROVIDE FUNDS TO THE BORROWER TO REPAY A CONSTRUCTION LOAN INCURRED BY THE BORROWER TO FUND THE COSTS OF ACQUISITION, CONSTRUCTION, IMPROVEMENT, RENOVATION, FURNISHING AND EQUIPPING OF ALL OF THE REAL AND PERSONAL PROPERTY CONSTITUTING THE "TIGER WOODS LEARNING CENTER," A TWO-STORY, 35,000 SQUARE FOOT BUILDING, INCLUDING A MULTIMEDIA CENTER, AN AUDITORIUM, CLASSROOMS, A COMPUTER LAB, A STUDENT LOUNGE AND CAFE, A PUTTING COURSE AND DRIVING RANGE, AND OTHER AMENITIES

SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
TIGER WOODS FOUNDATION INC

Employer identification number  
20-0677815

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .	X		10,830	RETAIL PRICE
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .				
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( <u>golf clubs</u> )	X	1	14,454	RETAIL PRICE
26 Other ► ( <u>and balls</u> )	X	1	51,780	retail price
27 Other ► ( <u>program</u> )	X	2	25,182	retail price
28 Other ► ( <u>computers</u> )	X	1	6,000	RETAIL PRICE

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .

30a

Yes

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

No

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .

32a

Yes

No

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Cat No 51227J

Schedule M (Form 990) (2012)

Part II

Supplemental Information.

Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Number of Contributions	Schedule M, Part I, Column B	For part I, column B, the foundation is reporting the number of contributions received FROM DONORS

2012

Open to Public Inspection

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization

TIGER WOODS FOUNDATION INC

Employer identification number

20-0677815



Identifier	Return Reference	Explanation
REVENUE LESS EXPENSES	FORM 990, PART I, LINE 19	<p>WHILE REVENUE LESS EXPENSES REPORTS A NET DEFICIT OF \$3,643,320, THIS DEFICIT INCLUDES A \$ 3,500,000 award MADE TO A RELATED ORGANIZATION It was agreed by the board, the founder al ong w ith legal counsel, that it was a prudent business decision to have Mr Woods' previou s contributions be utilized to support and underw rite the charitable activities made to th e related organization THE NET DEFICIT EXCLUDING THIS award WAS ONLY \$143,320 FOR THE YEA R ORGANIZATION'S MISSION, CONTINUED FORM 990, PART III, LINE 1 THE GROUNDBREAKING TIGER W OODS LEARNING CENTERS ("TWLC") IN ORANGE COUNTY, CA, WASHINGTON, D C , PHILADELPHIA, PA, A ND STUART, FL, ALONG WITH THE EARL WOODS SCHOLARSHIP PROGRAM PROVIDES A WEALTH OF EDUCATIO NAL OPPORTUNITIES TO YOUNG PEOPLE NATIONWIDE TWLC'S OPERATE SCHOOL FACILITIES THAT MAINTA IN REGULAR FACULTY, CURRICULUM, AND HAVE A REGULARLY ENROLLED STUDENT BODY OF STUDENTS IN ATTENDANCE, WITHIN THE MEANING OF SECTION 170(B)(1)(A)(II) OF THE CODE PROGRAM SERVICE AC TIVITIES FORM 990, PART III, LINE 4A, CONTINUED BUILDING ON THESE TENETS, THE TIGER WOODS LEARNING CENTER HAS INTEGRATED RESEARCH ON WHAT YOUNG PEOPLE NEED TO BECOME HEALTHY AND TH RIVING ADULTS THE PROGRAM SUPPORTS 15,000 UNIQUE STUDENTS PER YEAR CURRICULUM OFFERED - CAREER ORIENTATION PROGRAM ELEMENTARY SCHOOL - WEEK-LONG STUDENT/TEACHER ENRICHMENT DURI NG SCHOOL DAY STUDENT CURRICULUM FOCUSED ON FORENSIC SCIENCE/MARINE SCIENCE TEACHER PROF ESSIONAL DEVELOPMENT - STANDARDS-BASED SCIENCE, AND TECHNOLOGY INTEGRATION - CAREER EXPLO RATION PROGRAM MIDDLE/HIGH SCHOOL AFTER-SCHOOL ENRICHMENT 40 STEM FOCUSED MODULES EXAMP LES INCLUDE BIOTECHNOLOGY, ENGINEERING, ROBOTICS, VIDEO PRODUCTION, VIDEO GAME DESIGN, NU TRITION/FITNESS, ENTREPRENEURSHIP AND AEROSPACE TWLC-EXPANSION IN 2008, THE TIGER WOODS FOUNDATION LAUNCHED ITS FIRST EXPANSION TWLC CAMPUS IN WASHINGTON, D C IN PARTNERSHIP WIT H A LOCAL CHARTER SCHOOL TWO ADDITIONAL CAMPUSES WERE ADDED IN PHILADELPHIA, PA AND STUAR T, FL THE FOLLOWING YEAR TO PROVIDE YOUTH WITH AUTHENTIC LEARNING EXPERIENCES IN ONE OR MO RE TWLC SIGNATURE PROGRAMS FOCUSED ON SCIENCE, TECHNOLOGY, ENGINEERING AND MATH (STEM) CAR EER EXPLORATION AND COLLEGE PREPARATION A SECOND CAMPUS WAS OPENED IN PHILADELPHIA, PA IN 2013 AT THE CRISTO REY PHILADELPHIA HIGH SCHOOL TWLC CAMPUS STUDENTS HAVE ACCESS TO STAT E-OF-THE-ART TECHNOLOGY AND LEARN HOW TO USE TOOLS VITAL TO WORKPLACE PRODUCTIVITY IN THE 21ST CENTURY ALL EXPANSION LOCATIONS ARE SUPPORTED WITH TRAINING, CURRICULUM MATERIALS, R ESOURCE SUPPORT AND FUNDING CAMPUS MODEL 1 - WASHINGTON, D C - CESAR CHAVEZ CHARTER SCHO OL TWLC MAINTAINS TWO D C LOCATIONS IN PARTNERSHIP WITH THE CESAR CHAVEZ PUBLIC CHARTER S CHOO L FOR PUBLIC POLICY PATTERNED AFTER THE TWLC FLAGSHIP, THE CAMPUS MODEL 1 IS PROVIDED DEDICATED SPACE AT TWO CHAVEZ SCHOOLS, ONE ON CAPITOL HILL (GRADES 9-12) AND THE OTHER IN THE KENILWORTH NEIGHBORHOOD (GRADES 6-8 AND 9-12) TWF STAFF SERVES OVER 1,000 STUDENTS A NNUALLY IN ONSITE AND OUTREACH PROGRAMS WHERE STUDENTS CAN EARN HIGH SCHOOL CREDIT CURRIC ULUM OFFERED - CAPITOL HILL HIGH SCHOOL STUDENTS - AFTER SCHOOL ENRICHMENT COMMUNICATIO NS, VIDEO GAME DESIGN, COLLEGE ACCESS, AND FILMMAKING, SCHOOL DAY ELECTIVE COURSE ROBOTIC S AND VIDEO JOURNALISM - PARKSIDE MIDDLE SCHOOL STUDENTS - AFTER SCHOOL ENRICHMENT GOIN G GREEN IN SCIENCE AND ENGINEERING, FIRST LEGO LEAGUE ROBOTICS CLUB, GRAPHIC DESIGN, VIDEO GAME DESIGN - SCHOOL DAY ELECTIVE COURSE HIGH SCHOOL ROBOTICS - STEM CAREER CONFERENCE - SATURDAY HANDS-ON WORKSHOP FOR MIDDLE/HIGH SCHOOL STUDENTS FROM THE D C METRO AREA SPE CIFIC FOCUS ON CAREER EXPLORATION FOR STUDENTS AND COLLEGE PREPARATION FOR FAMILIES - SUM MER DAY CLASSES OPEN TO STUDENTS THROUGHOUT D C METRO AREA - ONE-WEEK CONTENT INTENSIVE WORKSHOPS EXAMPLES INCLUDE TWLC CURRICULUM IN FORENSIC SCIENCE, INTRO TO COMPUTER PROGRA MMING, ASTRONOMY, VIDEO GAME DESIGN, COMMUNICATIONS, ROCKETRY AND VIDEO PRODUCTION CAMPUS MODEL 2 - PHILADELPHIA, PA, STUART, FL A SECOND EXPANSION MODEL INVOLVES TWF PROVIDING FU NDDING AND PROGRAM RESOURCES TO LOCAL SCHOOLS AND/OR COMMUNITY BASED ORGANIZATIONS ASSISTIN G WITH THE SET-UP OF A TWLC-BRANDED ENVIRONMENT WITHIN ONE CLASSROOM OR DESIGNATED SPACE FUNDING COVERS CURRICULUM, FACILITY INFRASTRUCTURE AND SUPPORTS ONGOING PROFESSIONAL DEVEL OPMENT AND EVALUATION KEY COMPONENTS TO IDENTIFYING AN ACADEMIC PARTNER INCLUDE RESEARCH ON LOCAL DEMOGRAPHICS, SCHOOL PERFORMANCE ON STATE/NATIONAL ASSESSMENTS, AND A SHARED COM MITMENT TO DEVELOPING A COLLABORATIVE RELATIONSHIP WHERE BOTH TWF AND THE LOCAL ENTITY CAN LEARN AND GROW TOGETHER IN THIS MODEL SITE-BASED STAFF ADMINISTERS THE PROGRAM WHILE TWF PROGRAM STAFF PROVIDES BOTH CONSULTATION AND EXTERNAL SUPPORT TO ENSURE FIDELITY OF IMPLE MENTATION STUART, FL - MURRAY MIDDLE SCHOOL OFFERED AS AN AFTER-SCHOOL PROGRAM, TEACHERS AT MURRAY MIDDLE SCHOOL HAVE DELIVERED TWF FORENSIC SCIENCE, UNIVERSAL SCIENCE AND VIDEO G AME DESIGN TO THEIR STUDENTS IN ADDITION, SCHOOL</p>

Identifier	Return Reference	Explanation
REVENUE LESS EXPENSES	FORM 990, PART I, LINE 19	<p>STAFF HAS BEEN TRAINED IN POSITIVE YOUTH DEVELOPMENT METHODS AND HAVE INTEGRATED ACTIVITIES INTO THEIR ADVISORY CLASSES AT ALL GRADE LEVELS PHILADELPHIA, PA - KIPP - DUBOIS COLLEGIATE PREPARATORY ACADEMY OFFERS THEIR HIGH SCHOOL STUDENTS THE OPPORTUNITY TO DO HANDS-ON ACTIVITIES LIKE DISSECTION, VIDEO GAME DESIGN, BIOTECHNOLOGY, ENGINEERING AND CRIME SCENE INVESTIGATION DELIVERED AS A FOR-CREDIT CLASS, STUDENTS PARTICIPATE IN A SATURDAY ENRICHMENT WORKSHOP WHERE THEY ARE ABLE TO SPEND MORE TIME EXPLORING SCIENTIFIC CONCEPTS PHILADELPHIA, PA - CRISTO REY PHILADELPHIA HIGH SCHOOL THROUGH A PARTNERSHIP WITH USLI AND CRISTO REY PHILADELPHIA, THE TWLC CAMPUS AT CRISTO REY OFFERS UNIQUE STEM (SCIENCE, TECHNOLOGY, ENGINEERING, MATH) PROGRAMMING COURSES INCLUDE TETRIX ROBOTICS, WHERE STUDENTS USE THEIR CREATIVITY TO BUILD ROBOTS WHILE EXPLORING THE WORLD OF ENGINEERING, AND UNIVERSAL SCIENCE, WHICH FOCUSES ON CHEMISTRY AND BIOLOGY ADDITIONALLY THE TWLC CAMPUS PROVIDES MENTORING AND TEACHER-DEVELOPMENT TRAINING SUMMER CLASSES SIX ONE-WEEK CLASSES AT THE TWLC-OC AND TWLC-DC ELEMENTARY/MIDDLE/HIGH SCHOOL, SUMMER ACADEMY RESIDENTIAL PROGRAM FOCUSED ON STEM AND GOLF FOR CHILDREN FROM MILITARY FAMILIES GOLF OUTREACH TWLC-OC HOSTS WEEKLY CLINICS EACH SATURDAY AT THE TWLC GOLF FACILITY THE MOBILE GOLF PROGRAM TAKES THE TWLC GOLF PROGRAM ON THE ROAD TO LOCAL ELEMENTARY SCHOOLS OFFERED TO ORANGE COUNTY STUDENTS IN GRADES 5- 6, THIS THREE-PHASE PROGRAM EMPHASIZES THE FUNDAMENTALS OF PUTTING, PITCHING AND THE FULL SWING FORM 990, PART III, LINE 4C, CONTINUED FUNDING TUITION IS JUST ONE OF THE MANY HURDLES FACING FIRST-GENERATION COLLEGE STUDENTS MANY ARE LEAVING HOME FOR THE FIRST TIME, ATTEMPTING TO JUGGLE WORK AND CLASS WHILE SCRAPING TOGETHER ENOUGH MONEY FOR BOOKS AND OTHER SUPPLIES VIRTUALLY 90% OF OUR SCHOLARS ARE FIRST-GENERATION COLLEGE STUDENTS, NAVIGATING THROUGH COLLEGE ON THEIR OWN EWSP IS AN INCREDIBLE SUPPORT NETWORK THAT INCLUDES ADMISSIONS COUNSELING, DEDICATED MENTORS, SPECIALIZED INTERNSHIPS, FINANCIAL ASSISTANCE, PROFESSIONAL WORKSHOPS, AND CAREER DEVELOPMENT SERVICES FOR EACH SCHOLAR ACCEPTED INTO THE PROGRAM WORKSHOPS INCLUDE RESUME-WRITING, MOCK INTERVIEWS, INFORMATION ABOUT GRADUATE SCHOOL AND BEGINNING THE CAREER SEARCH IT IS IMPORTANT TO UNDERSCORE THAT SCHOLARS RECEIVE TWLFINANCIAL ASSISTANCE FOR TUITION, BOOKS, AND TRAVEL HOME AS WELL AS FOR TWLFWORKSHOPS AND WINTER CLOTHING ANOTHER ASPECT OF THE EWSP ARE PRE-COLLEGE WORKSHOPS DESIGNED TO GET YOUNG PEOPLE TO UNDERSTAND THAT IT IS NOT TOO EARLY TO START THINKING ABOUT COLLEGE AND THE BENEFITS OF A COLLEGE EDUCATION THE WORKSHOPS ARE DESIGNED TO HELP STUDENTS FINISH HIGH SCHOOL PREPARED FOR POSTSECONDARY EDUCATION AND WITH A CLEAR IDEA ON HOW TO BEST APPROACH THE APPLICATION PROCESS AND SECURE FINANCIAL AID THE PROGRAM ALSO ENGAGES PARENTS WITH INFORMATION REGARDING THE PROCESS THEIR STUDENTS ARE GOING THROUGH DURING MIDDLE AND HIGH SCHOOL, AND HOW TO BE ADVOCATES FOR THEIR STUDENTS' EDUCATIONAL SUCCESS THIS COLLEGE ACCESS PROGRAM IS OFFERED FOR FREE TO STUDENTS AND THEIR FAMILIES WHO ARE INTERESTED IN HIGHER EDUCATION AND HELPS INFORM THEM OF ITS IMPORTANCE AND AFFORDABILITY</p>

Identifier	Return Reference	Explanation
FORM 990, PART III, LINE 4D	OTHER PROGRAMS	<p>TWLC OFFERS VARIOUS COMMUNITY OUTREACH PROGRAMS, INCLUDING TOWN HALL MEETINGS, GUEST SPEAKERS, AND COLLEGE PREPARATION WORKSHOPS FOR FAMILIES AND STUDENTS THROUGHOUT SOUTHERN CALIFORNIA COLLEGE ACCESS PROGRAMS INCLUDE FOR MIDDLE/HIGH SCHOOL STUDENTS AND FAMILIES, THE TWF OFFERS WORKSHOPS ON NAVIGATING THE COLLEGE APPLICATION PROCESS AND FINANCIAL AID, COLLEGE ADMISSIONS INTERVIEWS AND INFORMATION SESSIONS FOR TOP UNIVERSITIES NATIONWIDE (BROWN, HARVARD, YALE, GEORGETOWN, FRANKLIN &amp; MARSHALL, REED AND MORE), AND A PRE-COLLEGE BOOTCAMP FOR HIGH SCHOOL SENIORS STEM CAREER CONFERENCE - SATURDAY HANDS-ON WORKSHOP FOR MIDDLE/HIGH SCHOOL STUDENTS FROM THE DC METRO AREA WITH A SPECIFIC FOCUS ON CAREER EXPLORATION FOR STUDENTS AND COLLEGE PREPARATION FOR FAMILIES MEMBERS OF THE ORGANIZATION FORM 990, PART VI, LINE 7A THE ORGANIZATION HAS a sole MEMBER THE MEMBER'S CLASS IS NONVOTING THE MEMBER ELECTS AND DESIGNATES THE BOARD OF governors ALL CORPORATE POWERS ARE MANAGED UNDER THE DIRECTION OF THE BOARD OF governors PROCESS FOR REVIEW OF FORM 990 FORM 990, PART VI, LINE 11 The Board of governors has delegated the review of the Form 990 to the Audit Committee The organization's Executive Staff works closely with the outside accounting firm it engages to review the return, and the final draft of Form 990 is also reviewed by the treasurer/CFO prior to providing the draft to the Audit Committee In addition to consulting with the treasurer/CFO and Executive Staff, the Audit Committee also meets with the accounting firm hired to prepare the Form 990 Subsequent to its review, the Audit Committee reports back to the Board regarding its oversight of the Form 990 and the final draft is provided to the entire Board before the return is filed its oversight of the Form 990 and the final draft is provided to the entire Board before the return is filed</p>

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

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

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

Identifier	Return Reference	Explanation
RECONCILIATION OF NET ASSETS	FORM 990, PART XI, LINE 9	UNREALIZED GAINS ON INTEREST RATE SWAP 1,228,368 PRIOR YEAR GRANT Refund (2,500) ----- TOTAL 1,225,868

SCHEDULE R  
(Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization  
TIGER WOODS FOUNDATION INC

Employer identification number  
20-0677815

Part I

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) TIGER WOODS LEARNING CENTER DC CAMPUSES 121 INNOVATION DR SUITE 150 IRVINE, CA 92617 45-3467705	EDUCATION	DC	69,202	7,152,030	TWF

Part II

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) TIGER WOODS CHARITY EVENT CORPORATION  121 INNOVATION DR SUITE 150  IRVINE, CA 92617 06-1554474	Fundraising	CA	501(c)(3)	11	TWF	Yes	



Part III

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

1s

No

No

No

No

No

No

No

No

No

No

No

No

No

Yes

Yes

Yes

Yes

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) TIGER WOODS CHARITY EVENT CORPORATION	B	3,500,000	SEE PART VII
(2) TIGER WOODS CHARITY EVENT CORPORATION	C	2,095,375	SEE PART VII

Schedule R (Form 990) 2012

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

[illegible]

Software ID:

Software Version:

EIN: 20-0677815

Name: TIGER WOODS FOUNDATION INC

Part VII

Supplemental Information

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

Identifier	Return Reference	Explanation
TRANSACTIONS WITH RELATED ORGANIZATIONS	SCHEDULE R, PART V, LINE 2, COLUMN (C)	GRANT PAID (B) The cash grants to the tiger woods charity event corporation were determined based on the recipient charitable organization's operational needs and was approved by the foundation's board of governors GRANT RECEIVED (C) THE CASH GRANTS FROM THE TIGER WOODS CHARITY EVENT CORPORATION WERE DETERMINED BASED ON THE RECIPIENT CHARITABLE ORGANIZATION'S OPERATIONAL NEEDS AND WAS APPROVED BY THE FOUNDATION'S BOARD DURING THE ANNUAL BUDGETING PROCESS FOR 2012-2013

-->