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# Form **990**

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047 2014

 Do not enter social security numbers on this form as it may be made public.
 Information about Form 990 and its instructions is at www.irs.gov/form990. Department of the Treasury Internal Revenue Service

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Open to Public Inspection

Form 990 (2014)

TEEA0113L 05/28/14

A	For t	the 2014 calen	dar	year, or ta	ху	ear begi	nning		- **		, 20	114, an	d endir	ng			,	
В	Check	if applicable	C			_									D Emplo	yer iden	tification number	
		ddress change	CI	LUBCORP	C	HARIT:	IES,	INC.							75-	2754	1798	
	$\square$	lame change	30	030 LBJ	F.	REEWA:	Y #60								<b>E</b> Teleph			
		nitial return	DI	ALLAS, '	ΓX	7523	4								972	-243	3-6191	
	ΠF	inal return/terminated													<u> </u>		0131	
	$\vdash$	mended return													G Gross	receints	\$ 75.	4,714.
	$\boldsymbol{H}$	application pending	F	Name and ad	dres	s of princip	oal officer							H(a) Is this			ubordinates? Ye	14.5
	٠, ٢	ppricetion penamy	1	AME AS										1			'`	
_	Tay	-exempt status		501(c)(3)	Τí	501(c) (		) <b>4</b> (ir	nsert no.)	$\neg \neg$	4947(a)(1	) or	527	H(b) Are all If 'No,'	attach a list	(see in	structions)	Ц
÷		ebsite: N/	_	1 301(0)(3)	ш	301(0) (		<i>)</i> ("	13011110.7	_Ш	4547(a)(1	<i>)</i> 01	JET				_	
K		m of organization		Corporation	П	Trust	Associ	untion	Other ►			I Vaa-	-4 formal	H(c) Group				
			_	Corporation	ш	Trust	ASSOC	lation [	Outer			L Tear	of format	199	8   1111	State of	legal domicile T	<u> </u>
F	rt I	Summar Briefly descri		the organiz	atu	on's miss	sion or	most s	significan	t act	tivities	DDO	TTDE	CDANTEC	mo cr	INDIC	TADI E	
	'	ORGANIZA		_		0113 11113	31011 01	1110303	signincan	ı acı	uvides	<u> PKO</u>	\TDE	<u>GRANTS</u>	_10_Ct	WKT.	TABLE	<b></b> -
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ě	2	Check this bo		► I if the	. — e or	rganızatı	on disc	ontinue	ed its ope	eratio	ons or d		d of me	ore than 2	5% of its		 ssets	
	3	Number of vo													- / / / / /	3	1	3
<b>ಿ</b>	4	Number of in											).			4		Ö
Ę.	5	Total number							ear 2014 (	(Par	t V, lıne	2a)				5		0
Activities &	6	Total number			-											6		0
Ą	1	Total unrelate										•				7a		0.
	b	<b>b</b> Net unrelated business taxable income from Form-990-T, line 34														7b		0.
	_						41.	1 _	KEC	Έ.	VEN			P	rior Year		Current	
<u> </u>	8	Contributions		-				105		٠		. 1			919,	752.	75	4,714.
e e	9		Program service revenue (Part VIII, line 2g)   3   All (7d) 3. 2015   9   Program service revenue (Part VIII, column (A), lines 3, 4, and 7d) 3. 2015   9															
Revenue	10	Other revenu										181		<u> </u>			<b> </b>	
	11   12	Total revenue										1626	12)		010 7	7.5.0	7.5	4 714
_	13	Grants and s										15 11 15 1	12)	<u> </u>	919,			4,714.
	14	Benefits paid								-5,	المنتسب			-	855,2	230.	12.	3,3 <u>29.</u>
	15	Salaries, other				-		-	-	مصيا	n (A) lu	205 5 1	10)			-	<u> </u>	
es	15									num	III (A), III	162 2-1	10)					
Expenses	тьа	Professional		_		-			-									
Š	b	Total fundrais	sıng	j expenses	(Pa	art IX, co	olumn (	D), line	e 25) 🟲 _			5,	102.					
ш	17	Other expens	ses	(Part IX, co	olui	mn (A), l	lines 11	a-11d,	, 11f-24e)	ι					69,3	381.	1	6,751.
	18	Total expens	es	Add lines 1	13-1	17 (must	equal l	Part IX	, column	(A)	, line 25	)			924,6	511.	740	0,080.
_	19	Revenue less	s ex	penses. Su	ıbtr	act line	18 from	line 1	2						-4,8	359.	1	4,634.
8 8														Beginnın	g of Currer	nt Year	End of \	/ear
3 <u>a</u> 86	20	Total assets													630,			5,725.
Net Assets Fund Balan	21	Total liabilitie	es (F	Part X, line	26	5)									634,8	358.	49	5,234.
_z	22	Net assets or	r fui	nd balance:	s S	Subtract	line 21	from l	ıne 20						-4,1	L43.	10	0,491.
Pa	ırt II	Signatur	re E	Block														
Und	er pena	ilties of perjury, I do Declaration of prepa	eclar	e that I have e	xam	ined this re	turn, inclu	iding acc	ompanying :	sched	fules and s	tatement	s, and to	the best of m	y knowledge	and bel	lief, it is true, corre	ct, and
COIT	piete L	Declaration of prepa	arer (	Older Klan onli	4	A // /	7/1/	nation of	which prepa		as any kno	wieage						
			14	7700	4	<u> </u>	ex c		<u> </u>						7.22	.15		
Siç	gn	Signati	ire o	roπicer	_				_		_			Da	te			
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Pa			NCE	S. FAI	RM.			<u> Jar</u>	er To	عد	~		1-11	7-15	self-employ	ed	P0002204	3
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Us	e Or	nly Firm's addre	ess	2435	N	CENTR	RAL E	XPY,	STE 7	00					Firm's EIN	<u>75                                    </u>	-2599166	
				RICHA	RI	DSON,	TX 7	5080	-2731						Phone no	(21		000
Ma	y the	IRS discuss th	nis r	eturn with	the	prepare	r showr	n abov	e <sup>9</sup> (see II	nstru	uctions)		-				X Yes	No

Form	990 (2014) CLUBCORP CHARITIES, IN		75-2	2754798	Page 2
Par		•			
	Check if Schedule O contains a response of	or note to any line in this Part III			
1	Briefly describe the organization's mission				
	PROVIDE GRANTS TO CHARITABLE OF	RGANIZATIONS			
	_				
2	Did the organization undertake any significant program	n services during the year which were	not listed on the prior		
	Form 990 or 990-EZ?			Yes	X No
	If 'Yes,' describe these new services on Schedule	0			_
3	Did the organization cease conducting, or make s	ignificant changes in how it conduc	ts, any program services?	Yes	X No
	If 'Yes,' describe these changes on Schedule O				_
4	Describe the organization's program service according Section 501(c)(3) and 501(c)(4) organizations are and revenue, if any, for each program service rep	required to report the amount of ar	rgest program services, as ants and allocations to othe	measured by ex ers, the total exp	penses enses,
4 a	(Code ) (Expenses \$ 723,3	329 including grants of \$	) (Revenue	\$	
	ALLOWS CLUBCORP CLUBS AND SOCIE				IEIR
	CHOICE.				
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4 b	(Code. ) (Expenses \$	including grants of \$	) (Revenue	\$	)
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40	(Code ) (Expenses \$	including grants of \$	) (Revenue	Ś	)
				·	
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					- <b></b> -
					<b>- -</b> -
		<del></del>			<b>-</b> -
4 0	Other program services (Describe in Schedule O.	)			
		grants of \$	) (Revenue \$	)	
4 e	Total program service expenses ►	723,329.			
BAA		TEEA0102L 05/28/14	··· <del>-</del>	Form 9	90 (2014)

# Form 990 (2014) CLUBCORP CHARITIES, INC. Part V Checklist of Required Schedules

	•		res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
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		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V</i> .	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a		х
b	Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
C	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII .	11 c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		_x
е	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
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	11 f		х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		х
	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		х
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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
20 a	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H .	20		Х
b	f 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2014) CLUBCORP CHARITIES, INC.

Part IV | Checklist of Required Schedules (continued)

			Yes	No
	·		162	NO
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		х
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		х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		-
	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes', complete Schedule L, Part II	26		Х
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? If 'Yes,' complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		•	
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
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		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	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)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
	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		Х
BAA		Form	990 (	2014)

	Check if Schedule O contains a response or note to any line in this Part V				П
				Yes	No
1 a	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	0			
ı	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming				ļ
	(gambling) winnings to prize winners?		1 c		<u> </u>
2 a	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-	_ ا			
	ments, filed for the calendar year ending with or within the year covered by this return	0			<b> </b>
ı	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2 b		
٠.	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)		3 a		Х
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3 b		<u>^</u>
	b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule 0	_	30		<del> </del>
4 8	a 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)	,,	4 a	İ	Х
	b If 'Yes,' enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	,			
5 a	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	ľ	5 a		X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	ľ	5 b		X
(	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6 :	Poes the organization have annual gross receipts that are normally greater than \$100,000, and did the organ	uzation			
0.	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organ solicit any contributions that were not tax deductible as charitable contributions?		6 a		Х
ı	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were				
	not tax deductible?	,	6 b		ļ
7	Organizations that may receive deductible contributions under section 170(c).				
á	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods a	ınd			X
	services provided to the payor?		7a 7b		
	b if 'Yes,' did the organization notify the donor of the value of the goods or services provided?	_	/ D		
•	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<sup>‡</sup>	7с		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d		-		
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract	7	7 e		X
1	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	ľ	7 f		Х
	g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899	•			
•	as required?		7 g		
ı	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?	a a	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	a h		$\overline{}$	-
	organization have excess business holdings at any time during the year?		8		X
9	Sponsoring organizations maintaining donor advised funds.	ľ			
i	a Did the sponsoring organization make any taxable distributions under section 4966?		9a		
ı	<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9 b		
	Section 501(c)(7) organizations. Enter:				
	a Initiation fees and capital contributions included on Part VIII, line 12				
1	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				
	Section 501(c)(12) organizations. Enter			į l	
	a Gross income from members or shareholders				
١	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)				
12	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12 a		
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b				
	Section 501(c)(29) qualified nonprofit health insurance issuers.			į J	] ;
	a Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O	j			
1	<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in				
				į į	1
	c Enter the amount of reserves on hand				-5
	a Did the organization receive any payments for indoor tanning services during the tax year?		14a	<b>  </b>	X
	b if 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O		14b		<u> </u> (2014)
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- 01111	75-2754796		'	aye
Par	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or char Schedule O. See instructions.	elow, iges i	and in	
	Check if Schedule O contains a response or note to any line in this Part VI			Х
Sec	tion A. Governing Body and Management			
_			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year  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			2 <b>%</b> 1383
b	Enter the number of voting members included in line 1a, above, who are independent 1b	30.7	, 3	,
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		X
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		х
4	Did the organization make any significant changes to its governing documents	<u> </u>		<del>  ^</del>
•	since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
_	Did the organization have members or stockholders?	6		X
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7 a		Х
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7 b	\$5,00m	X
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	1 + 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ا پیشو	
	The governing body?	8a		Х
	Each committee with authority to act on behalf of the governing body?	8 b		X
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	Х	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	<u>even</u> u	ie Co	ode.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10 a		X
b	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 ь		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O	•	- ,	
12 a	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		Х
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15 a	<u></u>	X
	Other officers or key employees of the organization	15 b		X
_	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)	10.2	\$17-a	
16 a	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	·	, X
b	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sect	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s for public inspection. Indicate how you made these available. Check all that apply  Own website. Another's website. X Upon request. Other (explain in Schedule O)	only)	avaıla	– – - able
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year.  SEE SCHEDULE O	ole to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records.	C1 01		
	CLUBCORP FINANCIAL MGMT 3030 LBJ FREEWAY, STE 400 DALLAS TX 75234 972-243-	OTAT		

Form <b>990</b> (	(2014)	CLUBCORP	CHARITIES,	INC.				75-275	4798	Page
Part VII				ectors,	Trustees,	Key Employee	s, Highest	Compensated	<b>Employees</b>	, and
	⁻Indep	endent Con	itractors							

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

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

	т			<del></del>			_	<del>_</del>		
	1	_		(C)						
(A) Name and Title	(B) Average hours per	15	s both	ı an c	officer /trust	eck moss pers and a ee)	1	(D) Reportable compensation from	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1) ERIC AFFELDT	1	]								
PRESIDENT	0	X		X				0.	0.	0.
(2) CURT MCCLELLAN TREASURER	<u>1_</u> 0	х		X				0.	0.	0.
(3) INGRID KEISER	1	]								
SECRETARY	0	X		X				0.	0.	0.
_(4)										
(5)										
(6)										
<u></u>									····-	
(9)		-								
(10)										
(11)										
(12)										
(13)										
(14)										
RAA	TEEAO	1071	02/2	7/14	Щ.					Form 990 (2014)

Part VII   Section A. Officers, Directors, 11		ney	Em		_	es,	and	a Hignest Con	pensated Emp	loyees (co	intinued)	
(A) Name and title	Average hours per week	offic	Position (do not check more box, unless person officer and a direct			tor/trustee)		(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation		
•	(list any hours for related organiza - tions below dotted line)	individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from t organizi and rel organiza	he ation ated	
(15)												
(16)												
(17)												
(18)												
(19)												
(20)										,		
(21)									-			
(22)												
(23)												
(24)					_							
(25)												
1 b Sub-total		<b></b>				<u> </u>	<b>-</b>	0.	0.		0.	
c Total from continuation sheets to Part VII, Section	on A						▶	0.	0.		0.	
d Total (add lines 1b and 1c)							<u> </u>	0.	0.		0.	
2 Total number of individuals (including but not limited from the organization ► 0	to those li	sted	abov	ve) v	vho i	recen	ved	more than \$100,00	0 of reportable comp	ensation		
_										Ye	s No	
3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for suc			key	em	ploy	ee,	or h	iighest compensat	led employee	3	X	
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	reportabler than \$1	e coi 50,00	mpe )0?	nsa If 'Y	tion 'es'	and comp	oth olete	er compensation i e Schedule J for	from	4	X	
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e compen s.' comple	satio te Sc	n fro	om a Iule	any <i>J fo</i>	unre r <i>suc</i>	late	d organization or erson	ındıvıdual	5	X	
Section B. Independent Contractors												
1 Complete this table for your five highest compen compensation from the organization. Report compen	sated inde sation for	the ca	dent	dar y	ntrac /ear	endii	tha ng w	t received more the organic than the organic transfer to the control of the contr	nan \$100,000 of ganization's tax year			
Name and business add	ress							(B) Description o	of services	(C) Compensat	tion	
2 Total number of independent contractors (including b	out not limi	ted to	tho	se li	sted	abov	ve) v	who received more	than			
\$100,000 of compensation from the organization		TEF AO	4001				_			Form <b>990</b>	(0014)	

Part VIII Statement of Revenue

		Check if Schedule O	contains a re	espo	nse or note to a	ny line in this Part V	/111		
}	•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1 a	Federated campaigns	1	а					
Contributions, Gifts, Grants and Other Similar. Amounts	l t	Membership dues.	1	ь		1			
0 E	c	Fundraising events	1	С	•	1			
iffs ar A	، ا	Related organizations	1	d					
s, G	e	Government grants (contributi	ons) 1	е					
5 2	, ا	All other contributions gifts o	rante and	$\top$			<u> </u>		
the late	'	All other contributions, gifts, c similar amounts not included	above 1	f	754,714	:			
重量	ç	Noncash contributions included	d in lines 1a-1f	\$					-
and a	h	Total. Add lines 1a-1f		-		754,714.	1		Ì
				T	Business Code				
Program Service Revenue	2 a	3							
æ	Ŀ	,		$\neg \vdash$					1
<u>ic</u>	C								
ē	d	,							
E	e	,							
gra	f	All other program service	ce revenue						
P	g	Total. Add lines 2a-2f		_		-			
	3	Investment income (inc	luding divide	nds,	interest and				
		other similar amounts)			•	<b>&gt;</b>			
	4	Income from investmen	it of tax-exem	npt t	ond proceeds.	<b>-</b>			
	5	Royalties				<u> </u>			
		_	(i) Real		(II) Personal				
		Gross rents							
		Less rental expenses							
		Rental income or (loss) .				<u> </u>			<del> </del>
	C	l Net rental income or (lo				>			
	7 a	Gross amount from sales of	(i) Securities		(II) Other				
		assets other than inventory					1		
	t	Less: cost or other basis							
		and sales expenses							l
		Gain or (loss)				<u> </u>			<del> </del>
		d Net gain or (loss)		ı		1			
음	8 a	Gross income from fund	draising even	ıts			İ		
ē		(not including . \$ of contributions reporte	d on line 1c)	-					
ě		See Part IV, line 18.	a on mic rey	ı					
<u> </u>		Less direct expenses		a b					1
Other Revenu		Det income or (loss) from	om fundraisin	~[	onte I	<u>-</u>		<u> </u>	
0				1	-				
	9 a	a Gross income from gan See Part IV, line 19	ning activities	s. a				•	
		Less direct expenses		b					
		Net income or (loss) from	om damind ad	ctivit	ies	<u> </u>			
	1		-	1					
	Iva	<ul> <li>Gross sales of inventor and allowances</li> </ul>	y, iess return	S a					
	1	Less: cost of goods sole		b	<del></del>				
	l	Net income or (loss) fro		าven	tory	<b>-</b>			
		Miscellaneous Reveni		Т	Business Code				
	11 a	3	· · ·						
	l t	b							
	6			_					
	c	d All other revenue			-				
	e	Total. Add lines 11a-11	d	_		<b>&gt;</b>	-		
		Total revenue. See inst			•	754,714.	0.	0.	0.
								<del>`</del>	<del></del>

#### Part IX Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must cor	mplete all columns All of	ther organizations must co	omplete column (A)	
	Check if Schedule O contains a				
Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	723,329.	723,329.		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 10	Other employee benefits Payroll taxes				
11	Fees for services (non-employees)		-		
a	Management				
	Legal				
	: Accounting	11,000.		11,000.	
	Lobbying .	11,000.		11,000.	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion				
				<del></del>	
13	Office expenses				
14	Information technology				
15	Royalties .				
16	Occupancy				
17	Travel				<u> </u>
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings. Interest	5,102.			5,102.
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization	_			
23 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.)				
а	BANK CHARGES	649.		649.	
t	\				
C	:				
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	740,080.	723,329.	11,649.	5,102.
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 ► ☐ if following SOP 98-2 (ASC 958-720)			,	- ,

**Balance Sheet** 

Part X

Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year Cash - non-interest-bearing 275,038 1 9,083. 2 Savings and temporary cash investments Pledges and grants receivable, net 3 355,677 496,642. Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' 6 beneficiary organizations (see instructions). Complete Part II of Schedule L Notes and loans receivable, net Inventories for sale or use. 8 9 Prepaid expenses and deferred charges. 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 10b 100 **b** Less: accumulated depreciation 11 Investments – publicly traded securities Investments - other securities. See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 Intangible assets 14 14 15 15 Other assets See Part IV, line 11 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 630,715. 505,725 Accounts payable and accrued expenses 17 17 634,858. 495,234 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 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 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties. Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 26 Total liabilities. Add lines 17 through 25 634,858 26 495,234 Organizations that follow SFAS 117 (ASC 958), check here > |X| and complete Balances lines 27 through 29, and lines 33 and 34. 27 27 Unrestricted net assets. -4,14310,491. 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 or Fund Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds. 30 Net Assets 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 33 -4,143 10,491 Total liabilities and net assets/fund balances 34 34 630,715. 505,725. BAA Form 990 (2014)

Forr	990 (2014) CLUBCORP CHARITIES, INC.	75-2754798		Pa	age 12
Pa	t XI Reconciliation of Net Assets		_		
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7	54,	714.
2	Total expenses (must equal Part IX, column (A), line 25)	2			080.
3	Revenue less expenses Subtract line 2 from line 1	3		14,	634.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			143.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses .	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		10,4	491.
Pa	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				П
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or re separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis	viewed on a			
ı	Were the organization's financial statements audited by an independent accountant?		2 b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a subasis, consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis	eparate			
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin Audit Act and OMB Circular A-133?	gle	3 a		х
	o If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	d audit	3 b		
BAA			Form	990	(2014)

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

Department of the Treasury Internal Revenue Service Name of the organization

**Public Charity Status and Public Support** 

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

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

CLUBCORP CHARITIES, INC. 75-2754798								
Par	t I	Reason for Public Cha	arity Status (All o	rganizations must	comple	ete this	part.) See instruc	tions.
The o	orga	nization is not a private found	dation because it is: (	(For lines 1 through 11,	check c	nly one	box )	
1	П	A church, convention of church	nes, or association of c	hurches described in sec	tion 170	(b)(1)(A)	(i) <b>.</b>	
2	П	A school described in section	n 170(b)(1)(A)(ii). (At	tach Schedule E )				
3	П	A hospital or a cooperative h			ction 17	0(Б)(1)(	A)(iii).	
4	П	A medical research organiza						nter the hospital's
		name, city, and state		·				
5		An organization operated for the 170(b)(1)(A)(iv). (Complete	ne benefit of a college of Part II.)	or university owned or op	erated by	y a gove	rnmental unit described in	section
6		A federal, state, or local gov		ental unit described in s	ection 1	<b>70(b)(</b> 1)	(A)(v).	
7		An organization that normally in section 170(b)(1)(A)(vi).	receives a substantial p Complete Part II)	part of its support from a	governm	ental un	it or from the general put	olic described
8		A community trust described	I in <b>section 170(b)(1)(</b>	(A)(vi). (Complete Part	II )			
9	X	An organization that normally if from activities related to its exinvestment income and unreduced June 30, 1975. See section is	empt functions – subje lated business taxabl <b>509(a)(2).</b> (Complete l	ct to certain exceptions, a e income (less section Part III.)	and (2) r 511 tax)	no more to from b	than 33-1/3% of its suppo usinesses acquired by	ort from gross
10	Ш	An organization organized a		=	-			
11		An organization organized a or more publicly supported or lines 11a through 11d that do	rganizations describe	ed in section 509(a)(1) o	or sectio	n 509(a	<b>Y2)</b> . See <b>section 509</b> (a)	ut the purposes of one (3). Check the box in
а		Type I. A supporting organization organization (s) the power to recomplete Part IV, Sections A	on operated supervise	d or controlled by its sur	norted c	rnanizat	ion(s) typically by giving	the supported on <b>You must</b>
b	ш	Type II. A supporting organize management of the supporting must complete Part IV, Section 11.	organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by the supported organizati	having control or on(s). <b>You</b>
С		Type III functionally integrated organization(s) (see instruction)						
d		Type III non-functionally integ functionally integrated. The c instructions) You must com	rated. A supporting orgorganization generally plete Part IV, Section	anization operated in cor must satisfy a distribu is A and D, and Part V.	nection tion req	with its s uiremen	supported organization(s) t and an attentiveness	that is not requirement (see
е		Check this box if the organiz integrated, or Type III non-fu	ation received a writt inctionally integrated	en determination from t supporting organization	the IRS	that is a	Type I, Type II, Type I	II functionally
f	En	ter the number of supported	organızatıons					
g	Pro	ovide the following information	n about the supported	d organization(s)				
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))		s the tion listed overning nent?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
<del>, ,</del>	_							
(B)								
(C)								
(D)								
<del>-,</del>								
(E)								
<b>Fotal</b>								
BAA	For	Paperwork Reduction Act N	otice, see the Instruc	tions for Form 990 or 9	90-EZ.		Schedule A (Form	990 or 990-EZ) 2014

## 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)

Sec	tion A. Public Support							
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(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							
<b>4</b> 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	<b>Public support.</b> Subtract line 5 from line 4							
Sec	tion B. Total Support							
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(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 VI)							
11	<b>Total support.</b> Add lines 7 through 10							
12	Gross receipts from related activ	ities, etc (see ins	tructions)			12		
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, th	ırd, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	▶ 🗌	
	tion C. Computation of Pul							
	Public support percentage for 20	• •	• •	ne 11, column (f))		14	<del></del>	
	Public support percentage from					15		
16 a	16a 33-1/3% support test — 2014. If the organization did not check the box on line 13, and the 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 — 2013. 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 — ■								
17 a	17a 10%-facts-and-circumstances test — 2014. 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 VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization							
t	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a	and-circumstance	s' test, check this	box and stop her	e. Explain in Pa	art VI how the	
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check the	s box and see i	nstructions -	
DAA	<del></del>				6-1	adula A /Carea	000 57 0014	

75-2754798

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II )

<u>Sec</u>	tion A. Public Support						
	dar year (or fiscal yr beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include		• [	•			
	received. (Do not include any 'unusual grants.')	871,112.	704,761.	724,485.	919,752.	754,713.	3,974,823.
2	Gross receipts from admis-	0,1,112.	70177021	,21,100.	32371001	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0/3/1/0201
	sions, merchandise sold or services performed, or facilities						
	furnished in any activity that is						
	related to the organization's tax-exempt purpose						0.
3	Gross receipts from activities						0.
	that are not an unrelated trade or business under section 513						0.
4	Tax revenues levied for the organization's benefit and						
	either paid to or expended on						
5	its behalf The value of services or						0.
,	facilities furnished by a						
	governmental unit to the organization without charge						0.
6	<b>Total.</b> Add lines 1 through 5	871,112.	704,761.	724,485.	919,752.	754,713.	3,974,823.
	Amounts included on lines 1,	J.1,111	, , , , , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	,	0/0/2/020.
	2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
ь	Amounts included on lines 2	<del></del>			<del></del> -	<u> </u>	<u></u>
	and 3 received from other than						
	disqualified persons that exceed the greater of \$5,000 or						
	1% of the amount on line 13	ا م	ا م	ا م	ا م	_	0
_	for the year Add lines 7a and 7b	0.	0.	0.	0. 0.	0.	0.
8	Public support (Subtract line					<del></del>	<u> </u>
	7c from line 6 )						3,974,823.
	tion B. Total Support	· · ·		<del></del>			
	dar year (or fiscal yr beginning in)	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	(d) 2013	<b>(e)</b> 2014	(f) Total
-	Amounts from line 6	871,112.	704,761.	724,485.	919,752.	754,713.	3,974,823.
10 a	Gross income from interest, dividends, payments received on securities loans,	l					
	rents, royalties and income from						•
ь	similar sources . Unrelated business taxable	-	-		_		0.
	income (less section 511						
	taxes) from businesses acquired after June 30, 1975						0.
c	Add lines 10a and 10b	0.	0.	0.	0.	0.	0.
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						0.
12	Other income Do not include gain or loss from the sale of		·				
	capital assets (Explain in Part VI.)						0.
13	Total support. (Add lines 9,						
	10c, 11 and 12)	871,112.	704,761.	724,485.	919,752.	754,713.	3,974,823.
14	First five years. If the Form 990 organization, check this box and	is for the organiza I <b>stop here</b>	ition's first, secon	d, third, fourth, or	fifth tax year as	a section 501(c)(.	5) ▶ □
Sec	tion C. Computation of Pu						
15	Public support percentage for 20			e 13, column (f))		15	100.00 %
16	Public support percentage from	2013 Schedule A,	Part III, line 15			.   16	100.00 %
Sec	tion D. Computation of Inv						
17	Investment income percentage f			-	nn (f))	17	0.00 %
18	Investment income percentage f					18	0.00 %
19 a	i <b>33-1/3% support tests – 2014.</b> It is not more than 33-1/3%, check						
ŧ	33-1/3% support tests — 2013. li	f the organization (	did not check a bo	ox on line 14 or lii	ne 19a, and line 1	16 is more than 33	3-1/3%, and
20	line 18 is not more than 33-1/39 <b>Private foundation.</b> If the organi						nization
20 BAA	<del></del>	- IZAGON GIG HOL CHE	TEFANANSI			hedule A (Form 99)	0 or 990 E7) 2014

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

		Yes	No
Are all of the organization's supported organizations listed by name in the organization's governing documents?  If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe			
the designation If historic and continuing relationship, explain	1		<u> </u>
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was			
described in section 509(a)(1) or (2)	_2		<b> </b>
6 D 4 H			
<b>3 a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below	3a		ſ
	1		<u> </u>
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization made the determination.	3b		
made the determination.			
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use	3c		
			İ
4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			İ
organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled			
or supervised by or in connection with its supported organizations	4b		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that			l
all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5 a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b)			i
and (c) below (if applicable) Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported			ı
organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by			
amendment to the organizing document)	5a		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the			
organization's organizing document?	5b		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of			
the filing organization's supported organizations? If 'Yes,' provide detail in Part VI	6		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
(defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990)	7		
9. Did the expension make a loop to a disqualified payon (as defined in each on 4050) and decombed in Line 73.15 May 1			
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990)	8		
9 a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons			,
as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?  If 'Yes,' provide detail in <b>Part VI</b>	9a		
<b>b</b> Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the			
supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI</b>	9b		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI	9с		 
10 a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding			
certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,'	-		
answer (b) below	10a		
<b>b</b> Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10b		

Pa	<u>rt IV</u>	Supporting Organizations (continued)			
				Yes	No
		he organization accepted a gift or contribution from any of the following persons?			
	gove	son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the ining body of a supported organization?	11a		
		nily member of a person described in (a) above?	11b		
$\overline{}$		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	11c		<u></u>
Sec	ction	B. Type I Supporting Organizations			
	D1 11-			Yes	No
1	or ele <b>Part</b> If the direc	e directors, trustees, or membership of one or more supported organizations have the power to regularly appoint ct at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, and to such powers during the tax year	1		
2		ne organization operate for the benefit of any supported organization other than the supported organization(s)			<u> </u>
2	that o	operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such			
		it carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization	2		<b> </b>
Sec		C. Type II Supporting Organizations			
				Yes	No
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees			
		ch of the organization's supported organization(s)? If No,' describe in <b>Part VI</b> how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
Sec		D. All Type III Supporting Organizations			
	-			Yes	No
_	<b>-</b>				
1	organ	ne organization provide to each of its supported organizations, by the last day of the fifth month of the sization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			İ
	year,	(2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the lization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	orgai	inzation's governing documents in effect on the date of notification, to the extent not previously provided	•		
2	organ	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported iization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how rganization maintained a close and continuous working relationship with the supported organization(s)	2		
3	voice all tin	ason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at nes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played is regard	3		
Sec	tion I	E. Type III Functionally-Integrated Supporting Organizations			
1	Checl	the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
	а 🗌 Т	he organization satisfied the Activities Test Complete line 2 below.			
	ь 🗌 т	he organization is the parent of each of its supported organizations Complete line 3 below			
1	с 🗌 Т	he organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions	5)		
2	Activ	ties Test. Answer (a) and (b) below.	(	Yes	No
,	suppo orgai	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the inted organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported nizations and explain how these activities directly furthered their exempt purposes, how the organization was			
		ensive to those supported organizations, and how the organization determined that these activities constituted antially all of its activities	2a		
	the o the o	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the inzation's involvement	2b		
3	Parer	nt of Supported Organizations Answer (a) and (b) below.		ļ	i
,	a Did the each	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in <b>Part VI</b></i>	3а		
	<b>b</b> Did th suppo	e organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b		ا '

Pa	rt V   Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	niza	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on No other Type III non-functionally integrated supporting organizations must complete	vembe Secti	er 20, 1970 <b>See instruct</b> ons A through E.	ions. All
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	-	
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
t	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
_	e Discount claimed for blockage or other factors (explain in detail in Part VI).			1
2	Acquisition indebtedness applicable to non-exempt-use assets	2	-	
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 035	6		
_7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	, ma e, comment	3	·	
4	Enter greater of line 2 or line 3	4	-	
5	Income tax imposed in prior year .	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) .	6		
7	Check here if the current year is the organization's first as a non-functionally-inter(see instructions)	grated	Type III supporting org	ganization
BAA			Schedule A (For	m 990 or 990-EZ) 2014

Par	t V Type III Non-Functionally Integrated 509(a)(3) Su	apporting Organiza	ations (continued)	
Sec	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	rposes		
2	Amounts paid to perform activity that directly furthers exempt purposes on excess of income from activity	of supported organization	s,	
3	Administrative expenses paid to accomplish exempt purposes of su	upported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions.			
_7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization <b>Part VI</b> ). See instructions	on is responsive (provide	details	
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sec	ion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required – see instructions)			
3	Excess distributions carryover, if any, to 2014			
a				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f		ï	
4	Distributions for 2014 from Section D, line 7· \$			
а	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
<u>c</u>	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6	Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2015. Add lines 3j and 4c			
8	Breakdown of line 7:			
а				
b				
С	1			
d	Excess from 2013			
е	Excess from 2014			
BAA			Sabadula A (Farr	n 990 or 990 EZ) 2014

Supplemental Information. 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).

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

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2014

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

CLUBCORP CHARITIES, INC

Employer identification number

75-2754798

#### FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

NO DOCUMENTS AVAILABLE TO THE PUBLIC.

ck#2628	Special Olympics Broward County	27-Feb-2014		4,574.36
ck#3535	Silicon Valley FACES	23-Jan-2014		95,105.82
ck#3536	Racing Mules Golf Assoc.	23-Jan-2014		3,620.37
ck#3537	Rotary Club of Buford/N. Gwinnett	23-Jan-2014		7,858.49
ck#3538	Dental Health Programs, Inc.	23-Jan-2014		12,990.36
ck#3539	Riverside Police Officers Assoc.	23-Jan-2014		4,137.40
ck#3540	Central Alabama March of Dimes	23-Jan-2014		2,427.83
ck#3541	Habitat for Humanity	23-Jan-2014		10,185.59
ck#3542	The Sunshine Kids Foundation	23-Jan-2014		3,101.32
ck#3543	Jessie Rees Foundation	23-Jan-2014		46,664.76
ck#3544	FARA	23-Jan-2014		2,044.50
ck#3545	Holly Springs Booster Club	23-Jan-2014		1,486.20
ck#3546	Wounded Warrior Project	23-Jan-2014		2,110.44
ck#3547	Ara Parseghian Medical Foundation	23-Jan-2014		1,809.65
ck#3548	La Buena Vida Foundation	23-Jan-2014	<del></del>	5,271.85
ck#3549	Glimmer of Hope Foundation	23-Jan-2014	VOID	1,270.64
ck#3550	Special Ministries of Livingston County	23-Jan-2014	VOID	
ck#3551	Second Harvest	23-Jan-2014		674.50
ck#3552	Loudoun Free Clinic	23-Jan-2014		3,588.60
ck#3553	Silver Lake Scholarship Fund	23-Jan-2014		2,395.59
ck#3554	Presbyterian Villages of Michigan Foundation	23-Jan-2014		6,690.40
ck#3555	Boys & Girls Club of Colin County	23-Jan-2014		11,032.40
ck#3556	First Tee of Greater Sacramento	23-Jan-2014		1,115.10
ck#3557	Toys of Hope	23-Jan-2014		3,363.85
ck#3558	The Miracle League of Southlake	27-Feb-2014	VOID	9,554.87
ck#3559	Treesdale Employee Scholarship Fund	23-Jan-2014		4,487.13
ck#3560	Big Brothers Big Sisters of San Diego County	23-Jan-2014		7,509.36
ck#3561	ClubCorp	27-Jan-2014		20.00
ck#3562	ClubCorp	27-Jan-2014		11,500.00
ck#3563	Network of Anthem Area Assistance	27-Feb-2014	<del></del>	14,141.99
ck#3564	Lone Star Honor Flight	27-Feb-2014		3,016.99
ck#3566	Special Spaces Houston	27-Feb-2014		5,986.49
ck#3567	TIP of Southern Nevada	27-Feb-2014		4,913.10
ck#3568	Edison School	27-Feb-2014		1,211.40
ck#3569	Parent Project Muscular Dystrophy	27-Feb-2014		11,386.49
ck#3570	Palmetto Health Foundation	27-Feb-2014	<del></del>	2,462.07
ck#3571	Junior League of Tampa (Kids in the Kitchen)	27-Feb-2014		537.47
ck#3572	Junior League Knoxville	27-Feb-2014		3,075.00
ck#3573	STAX Music Academy	27-Feb-2014		4,195.50
ck#3574	Big Brothers & Big Sisters of the Greater Miami V	27-Feb-2014		276.70
ck#3575	Team in Training	27-Feb-2014	*****	1,125.48
ck#3576	Stepping Stones Educational Therapy Center	27-Feb-2014		1,408.64
ck#3577	Florida Cancer Specialists Foundation	27-Feb-2014		3,752.80
ck#3578	Transplant For Children	27-Feb-2014		3,845.85
ck#3579	The Wounded Warrior Project	27-Feb-2014		4,191.02
ck#3580	One Irving	27-Feb-2014		13,717.22
ck#3581	One Hope United	27-Feb-2014		3,612.12
ck#3582	Rancho Mırage Rotary	27-Feb-2014		1,205.04

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ck#3583	Susan G. Komen North Texas Foundation	27-Feb-2014		679.80
ck#3584	Susan G Komen	27-Feb-2014		11,485.01
ck#3585	Arlington Life Shelter	27-Feb-2014		2,210.60
ck#3586	Indianapolis Symphony	27-Feb-2014		5,414.65
ck#3587	Alzheimers Association	27-Feb-2014		2,278.20
ck#3588	Birmingham Civil Rights Institute	27-Feb-2014		1,075.70
ck#3589	Homes for Heros	27-Feb-2014		466.12
ck#3590	Lake Travis Youth Association	27-Feb-2014		8,477.75
ck#3591	Big Brothers & Big Sisters	27-Feb-2014		5,981.97
ck#3592	Red Cross	27-Feb-2014		2,140.49
ck#3593	Urban League of Hampton Roads	27-Feb-2014	VOID	2,281.37
ck#3594	A Wish With Wings	27-Feb-2014		5,356.16
ck#3596	The Smile Never Fades	27-Feb-2014		6,001.71
ck#3597	Love Cures	27-Feb-2014	VOID	612.72
ck#3598	Area Churches Together Serving	27-Feb-2014		2,341.86
ck#3599	Jim Utley Foundation	27-Feb-2014	VOID	16,598.56
ck#3599	Jim Utley Foundation	06-Mar-2014		16,055.29
ck#3600	Home for Little Wanderers	27-Feb-2014		5,299.49
ck#3601	Friends of Wilbur	27-Feb-2014		16,598.56
ck#3602	Ovarian Cancer Institute	27-Feb-2014		2,617.18
ck#3603	The Food Effect	27-Feb-2014		2,521.00
ck#3604	Kidzu Children's Museum	27-Feb-2014		1,183.96
ck#3605	Base Camp Children's Cancer Foundation	27-Feb-2014		319.94
ck#3606	SOME	27-Feb-2014		2,364.41
ck#3607	Muscular Dystrophy Assoc.	27-Feb-2014		51.98
ck#3608	United Way of Greater Atlanta	27-Feb-2014		1,556.52
ck#3609	A Child's Haven	27-Feb-2014		4,730.76
ck#3610	Hire Heroes USA	27-Feb-2014		2,148.00
ck#3611	Have a Ball Foundation	27-Feb-2014		6,716.91
ck#3612	Cystic Fibrosis Foundation - Virginia Chapter	27-Feb-2014		1,507.80
ck#3613	Southwest Volusia Habitat for Humanity	27-Feb-2014		643.50
ck#3614	Akron Children's Hospital	27-Feb-2014		25,199.24
ck#3615	Project Walk Atlanta, Inc.	27-Feb-2014		716.30
ck#3616	Children's Restoraton Network	27-Feb-2014		716.30
ck#3617	Open Heart Magic	27-Feb-2014		8,325.17
ck#3618	Stuart Sunrise Rotary Charitable Foundation	27-Feb-2014		2,948.90
ck#3619	PADV	27-Feb-2014		2,047.20
ck#3620	No Boundaries International	27-Feb-2014		277.50
ck#3621	Piedmont Charitable Foundation	27-Feb-2014		2,056.72
ck#3622	Second Harvest Food Bank	27-Feb-2014		2,713.49
ck#3623	Clarity Child Guidance Center	27-Feb-2014		3,512.19
ck#3624	Suicide Prevention Education Alliance	27-Feb-2014		13,520.69
ck#3625	Women's Center & Shelter of Greater Pittsburgh	27-Feb-2014 27-Feb-2014		2,500.37
ck#3626	Make-a-Wish Arizona	27-Feb-2014	<u> </u>	26,144.97
	David Toms Foundation	27-Feb-2014 27-Feb-2014		1,540.50
ck#3627		28-Feb-2014	VOID	4,574.36
ck#3628	Special Olympics Broward County		עוטע	
ck#3629	TMH Foundation	27-Feb-2014		2,069.23
ck#3630	Umass Club Scholarship Fund	27-Feb-2014		3,157.68
ck#3631	Breanna Capodice Scholarship Fund	27-Feb-2014		7,231.19
ck#3632	Tennessee Secretary of State	19-Mar-2014		20.00
ck#3633	Dept of Financial Institutions	19-Mar-2014		15.00
ck#3634	California Secretary of State	19-Mar-2014		25.00

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ck#3635	Commonwealth of Massachusetts	19-Mar-2014		125.00
ck#3636	Nevada Legal News	19-Mar-2014		24.95
ck#3637	Commonwealth of Virginia	19-Mar-2014		25.00
ck#3638	Ronald McDonald House Charities	19-Mar-2014		12,932.39
ck#3639	Wounded Warrior Project	19-Mar-2014		2,619.64
ck#3640	Northwest Assistance Ministries	19-Mar-2014	·	32,085.05
ck#3641	ClubCorp	19-Mar-2014		8,500.00
ck#3642	DC Treasurer	16-Apr-2014		80.00
ck#3643	Georgia Secretary of State	16-Apr-2014		30.00
ck#3644	Florida Dept of State	16-Apr-2014		61.25
ck#3645	Kansas Secretary of State	16-Apr-2014		40.00
ck#3646	SC Secretary of State	20-May-2014	·····	50.00
ck#3647	Urban League Of Hampton Roads (replace ck#35			2,281.37
ck#3648	Second Chance Pet (replace ck#3518)	17-Jun-2014		2,019.00
ck#3649	Rally for the Cure (replace ck#3473)	17-Jun-2014		1,509.19
ck#3650	Kay Yow Center Fund	17-Jun-2014		9,035.00
ck#3651	Alana's Foundation (replace ck#3550)	17-Jun-2014		15.23
ck#3652	Special Ministries of Livingston County (replace of	17-Jun-2014		15.23
ck#3653	Kansas Secretary of State	02-Jul-2014		35.00
ck#3654	Illinois Charity Bureau Fund	02-Jul-2014 02-Jul-2014		15.00
ck#3655	Tennessee Secretary of State	02-Jul-2014 02-Jul-2014		240.00
ck#3656	Dept of Financial Institutions	02-Jul-2014 02-Jul-2014	· ···· ·	54.00
ck#3657	NC Dept of the Secretary of State	08-Jul-2014		200.00
ck#3658	Treasurer of Virginia	30-Jul-2014		250.00
ck#3659	Nevada Secretary of State	30-Jul-2014		25.00
ck#3660	Illinois Secretary of State	30-Jul-2014		10.00
ck#3661	Lone Star Honor Flight	30-Jul-2014 30-Jul-2014		300.00
ck#3662	Ronald McDonald House Charities	30-Jul-2014 30-Jul-2014		390.60
ck#3663	Jessie Rees Foundation	30-Jul-2014		22.50
ck#3664	Cook Children's NICU (replace ck#3492)	30-Jul-2014		10,390.55
ck#3665	Glimmer of Hope Foundation (replace ck#3549)	30-Jul-2014 30-Jul-2014	·-··········	1,270.64
ck#3666	Love Cures (replace ck#3597)	30-Jul-2014		612.72
ck#3667	Christopher's Clubhouse	30-Jul-2014	VOID	12,197.37
ck#3668	Rancho Mirage Rotary	30-Jul-2014	VOID	
ck#3669	Barrow Neurological Institute	30-Jul-2014	VOID	10,719.91
ck#3671	Christopher's Clubhouse (replace ck#3667)	05-Aug-2014	<del></del> -	12,198.62
ck#3672	Rancho Mirage Rotary (replace ck#3668)	05-Aug-2014 05-Aug-2014		5,038.62
ck#3673	Indiana Secretary of State	05-Aug-2014 05-Aug-2014		10.00
ck#3674	CA Franchise Tax Board	05-Aug-2014 05-Aug-2014		10.00
ck#3675	Attorney General's Registry of Charitable Trusts	05-Aug-2014 05-Aug-2014		75.00
ck#3676	Louisiana Secretary of State			
ck#3677	Arizona Corporation Commission	05-Aug-2014 05-Aug-2014		30.00
ck#3679	NYS Department of Law			10.00
ck#3680	Dept of Commerce and Consumer Affairs	26-Aug-2014		25.00
ck#3681	· · · · · · · · · · · · · · · · · · ·	26-Aug-2014		5.00
ck#3682	AL Office of the Attorney General ClubCorp (State of Missouri and State of Colorade	26-Aug-2014		25.00
ck#3684	Richmond Fisher House	28-Aug-2014		30.00
ck#3685	OCTANE Foundation for Innovation	28-Aug-2014		783.42
ck#3686		28-Aug-2014		4,848.34
	Commonwealth of Pennsylvania	20-Oct-2014		250.00
ck#3687	State of Michigan	20-Oct-2014	1/015	20.00
ck#3688	Florida Dept of Agriculture and Consumer Service	20-Oct-2014	VOID	20.00
ck#3688	Florida Dept of Agriculture and Consumer Service	17-Nov-2014		300.00

ck#3689	Solace for Stephanie Inc	20-Oct-2014	<u> </u>	1,429.75
ck#3690	ClubCorp (CO Secretary of State)	20-Oct-2014		10.00
ck#3691	Mississippi Secretary of State	01-Dec-2014	<del> </del>	50.00
ck#3692	Fresh Start	11-Nov-2014	<del> </del>	5,500.31
ck#3693	The Salvation Army of Livingston County	11-Nov-2014		610.66
ck#3695	Harbor House	11-Nov-2014		113.83
ck#3696	Artemis House Center	11-Nov-2014		1,232.68
ck#3697	Augie's Quest	11-Nov-2014	VOID	
ck#3698	WA Secretary of State	01-Dec-2014	VOID	10.00
ck#3699	WA Secretary of State WA Secretary of State	01-Dec-2014		40.00
ck#3700	DC Treasurer			412.50
		01-Dec-2014		
ck#3701	American Cancer Soiety (replace ck#3697)	01-Dec-2014		6,688.26
ck#3702	Second Harvest Food Bank of Orange County	29-Dec-2014		55,583.67
ck#3703	Ashlyn Would Go Foundation	29-Dec-2014	ļ	2,744.08
ck#3704	Kiwanis Club of Suwanee	29-Dec-2014		7,805.66
ck#3705	Assistance League of Riverside	29-Dec-2014		5,184.41
ck#3706	Hospice of the Lowcountry	29-Dec-2014		3,489.25
ck#3707	Humble Area Assistant Ministries	29-Dec-2014		25,723.69
ck#3708	A Child's Haven	29-Dec-2014		6,137.00
ck#3709	STAX Foundation	29-Dec-2014		960.78
ck#3710	Wounded Warrior Foundation	29-Dec-2014		1,912.50
ck#3711	Kelsey Grace Foundation	29-Dec-2014	VOID	710.10
ck#3712	Salute Military Golf Association	29-Dec-2014		2,783.99
ck#3713	Dallas Mavericks Foundation	29-Dec-2014		8,745.12
ck#3714	500 Club of Houston and Harris County	29-Dec-2014		1,745.63
ck#3715	National Junior Tennis and Learning	29-Dec-2014		1,966.33
ck#3716	Leukemia and Lymphoma Society	29-Dec-2014		10,447.10
ck#3717	ST Piusx Catholic Church	29-Dec-2014		4,325.54
ck#3718	La Buena Vida Youth Leadership Foundation	29-Dec-2014		8,646.62
ck#3719	Council on at risk youth	29-Dec-2014		500.08
ck#3720	Stuart Sunrise Rotary Charitable Foundation	29-Dec-2014		2,333.25
ck#3721	Navy Marine Release Fund	29-Dec-2014	VOID	2,987.75
ck#3722	Arlington Margarita Society	29-Dec-2014		3,149.25
ck#3724	Metropolitan Youth Orchestra	29-Dec-2014		4,440.77
ck#3725	Ace & TJ's Grin Kıds	29-Dec-2014		2,447.15
ck#3726	The Rotary of New Tampa	29-Dec-2014		1,756.95
ck#3727	Augie's Quest	29-Dec-2014		101.03
ck#3728	United Way of Forsyth County	29-Dec-2014		1,857.09
ck#3729	HOPE South Florida	29-Dec-2014		2,030.08
ck#3730	Big Brother Big Sister of San Diego County	29-Dec-2014		8,052.74
ck#3731	The Neuse Golf Club	30-Dec-2014		384.00
ck#3732	NC Fallen Firefighters Foundation	30-Dec-2014		1,616.00
ck#3733	Navy Marine Relief Fund (replace ck#3721)	30-Dec-2014		2,987.75
ck#3734	Southern Crescent Habitat for Humanity (replace	30-Dec-2014		710.10
<u> </u>	The Miracle League of Southlake	23-Jan-2014		9,554.87
	r/c 12/20 deposit - MDA Charity Classic ck#13093	23-Jan-2014		2,240.00
	01/14 service charge fee	23-Jan-2014		60.50
	r/c 12/30 wire deposit - MDA Charity Classic (acct			4,320.00
	2/13 service charge fee	27-Feb-2014		33.57
<u> </u>	3/13 service charge fee	20-Mar-2014		61.84
<u> </u>			<del></del>	25.54
<u> </u>	4/14 service charge fee	16-Apr-2014		
	r/c balance to location 00301 from 00555	16-Apr-2014	L	160.00

	5/13 service charge fee	19-May-2014	44.63
	6/14 service charge fee	17-Jun-2014	77.67
•	7/14 service charge fee	17-Jul-2014	101.62
	8/13 service charge fee	26-Aug-2014	130.47
	9/12 service charge fee	10-Oct-2014	29.11
	10/14 service charge fee	20-Oct-2014	27.70
	11/14 service charge fee	01-Dec-2014	28.64
	12/11 service charge fee	24-Dec-2014	27.77

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## Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return ► File a separate application for each return.

Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

<ul><li>If you a</li></ul>	re filing for an Automatic 3-Month Extension, co	mplete only	y Part I and check this box	•	. <b>-</b> 🗓		
<ul><li>If you a</li></ul>	re filing for an Additional (Not Automatic) 3-Mon	ith Extensio	on, complete only Part II (on page 2 of t	this form).	-		
Do not com	nplete Part II unless you have already been grant	ed an autor	natic 3-month extension on a previously	filed Form 8868.			
corporation request an e Associated	filing (e-file). You can electronically file Form 886 required to file Form 990-T), or an additional (no extension of time to file any of the forms listed in Par With Certain Personal Benefit Contracts, which no ling of this form, visit www.irs.gov/efile and click	ot automation t I or Part II nust be sen	<ul> <li>3-month extension of time You can e with the exception of Form 8870, Information to the IRS in paper format (see instruct</li> </ul>	electronically file Fo on Return for Transfe	rm 8868 to ers		
Partl	Automatic 3-Month Extension of Time	e. Only su	bmit original (no copies needed)	).			
***************************************	on required to file Form 990-T and requesting an		<del></del>		nly 🕨 🗀		
•	rporations (including 1120-C filers), partnerships,			•	لـا		
income tax		, MLIVIICS, a	•				
			Enter filer's ident	tifying number, see			
<b>~</b>	Name of exempt organization or other filer, see instructions  Emplo				number (EIN) or		
Type or print							
<b>P</b> ******	CLUBCORP CHARITIES, INC.  Number, street, and room or suite number if a P.O. box, see instructions			75-2754798			
File by the due date for filing your return See instructions		instructions		Social security number	Social security number (SSN)		
	3030 LBJ FREEWAY #600 City, town or post office, state, and ZIP code For a foreign address, see instructions						
	DALLAS, TX 75234						
Enter the Re	eturn code for the return that this application is fo	or (file a se	parate application for each return)		01		
		,	,		<u> </u>		
Application Is For		Return Code	Application Is For		Return Code		
Form 990 or Form 990-EZ		01	Form 990-T (corporation)		07		
Form 990-B	L	02	Form 1041-A				
Form 4720 (individual)		03	Form 4720 (other than individual)		09		
Form 990-PF		04	Form 5227		10		
Form 990-T (section 401(a) or 408(a) trust)		05	Form 6069		11		
Form 990-T (trust other than above)		06	Form 8870		12		
<ul> <li>The book</li> </ul>	s are in the care of <a href="CLUBCORP_FINANCI">CLUBCORP_FINANCI</a>	AL MGMT					
	ne No. ► 214-243-6191	Fax No			. 🗆		
	ganization does not have an office or place of bu				, ▶⊔		
	for a Group Return, enter the organization's four						
	is box Light is for part of the group, or	THECK THIS D	ox . Figure and attach a list with the ha	ames and Elins of a	a members		
	nsion is for. st an automatic 3-month (6 months for a corporation	required to	file Form 990-T) extension of time				
-	8/15 , 20 15 , to file the exempt organization		•				
	tension is for the organization's return for:						
_	calendar year 20 14 or						
▶ 🗖	tax year beginning, 20	. and endir	na . 20 .				
L.,	ax year entered in line 1 is for less than 12 month	- - -		1 1			
_	ax year entered in line 1 is for less than 12 mont ange in accounting period	ins, check r	eason. Clinitial return CFI	nal return			
	ange in accounting period						
3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions							
<b>b</b> If this tax par	b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit						
c Balanc EFTPS	c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions						

payment instructions.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for