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Form 990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

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Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation PIEDMONT TRIAD CHARITABLE FOUNDATION D/B/A WYNDHAM CHAMPIONSHIP		A Employer identification number 56-6085407	
Number and street (or P O box number if mail is not delivered to street address) 416 GALLIMORE DAIRY ROAD SUITE M		B Telephone number (see instructions) (336) 379-1570	
City or town, state or province, country, and ZIP or foreign postal code GREENSBORO, NC 27409		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 1,809,671		J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))			Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	1,085,828			
	2	Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments	4,218	4,218	4,218	
	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10 <input type="checkbox"/>	-5,389			
	b	Gross sales price for all assets on line 6a _____				
	7	Capital gain net income (from Part IV, line 2)		0		
	8	Net short-term capital gain			0	
	9	Income modifications				
	10a	Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule) <input type="checkbox"/>	12,686,965	0	12,686,965	
	12	Total. Add lines 1 through 11	13,771,622	4,218	12,691,183	
	13	Compensation of officers, directors, trustees, etc	0	0	0	0
	14	Other employee salaries and wages	1,092,893	0	1,092,893	1,117,388
	15	Pension plans, employee benefits	89,527	0	89,527	88,059
	16a	Legal fees (attach schedule). <input type="checkbox"/>	3,681	0	3,681	3,681
	b	Accounting fees (attach schedule). <input type="checkbox"/>	12,900	0	12,900	12,900
	c	Other professional fees (attach schedule)				
	17	Interest	144,830	4,218	144,830	140,612
	18	Taxes (attach schedule) (see instructions) <input type="checkbox"/>	69,962	0	69,962	64,374
	19	Depreciation (attach schedule) and depletion	58,075	0	58,075	
	20	Occupancy	49,288	0	49,288	49,291
	21	Travel, conferences, and meetings.				
	22	Printing and publications				
	23	Other expenses (attach schedule). <input type="checkbox"/>	10,963,269	0	10,963,269	-1,768,731
	24	Total operating and administrative expenses.				
		Add lines 13 through 23	12,484,425	4,218	12,484,425	-292,426
	25	Contributions, gifts, grants paid	362,071			382,571
	26	Total expenses and disbursements. Add lines 24 and 25	12,846,496	4,218	12,484,425	90,145
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	925,126			
	b	Net investment income (if negative, enter -0-)		0		
	c	Adjusted net income (if negative, enter -0-)			206,758	

Part II		Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing		1,707	4,350	4,350
	2	Savings and temporary cash investments		365,819	272,466	272,466
	3	Accounts receivable ▶ <u>738,958</u>				
		Less allowance for doubtful accounts ▶ _____		305,898	738,958	738,958
	4	Pledges receivable ▶ _____				
		Less allowance for doubtful accounts ▶ _____				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).		51,270	68,360	68,360
	7	Other notes and loans receivable (attach schedule) ▶ _____				
		Less allowance for doubtful accounts ▶ _____				
	8	Inventories for sale or use		36,904	26,508	26,508
	9	Prepaid expenses and deferred charges		588,512	301,556	301,556
	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	c	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶ _____				
	Less accumulated depreciation (attach schedule) ▶ _____					
12	Investments—mortgage loans.					
13	Investments—other (attach schedule)					
14	Land, buildings, and equipment basis ▶ <u>557,680</u>					
	Less accumulated depreciation (attach schedule) ▶ <u>339,969</u>		140,111	217,711	217,711	
15	Other assets (describe ▶ _____)		258,774	179,762	179,762	
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)		1,748,995	1,809,671	1,809,671	
Liabilities	17	Accounts payable and accrued expenses		262,221	201,881	
	18	Grants payable				
	19	Deferred revenue		178,734	374,624	
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule).		5,625,167	4,625,167	
	22	Other liabilities (describe ▶ _____)				
	23	Total liabilities (add lines 17 through 22)		6,066,122	5,201,672	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted		-4,317,127	-3,392,001	
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances (see instructions)		-4,317,127	-3,392,001	
	31	Total liabilities and net assets/fund balances (see instructions)		1,748,995	1,809,671	

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1	-4,317,127
2	Enter amount from Part I, line 27a	2	925,126
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	-3,392,001
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	-3,392,001

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1a				
b				
c				
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 }		3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	854,744	809,440	1 055970
2013	521,350	698,544	0 746338
2012	642,660	792,017	0 811422
2011	1,721,265	739,573	2 327377
2010	1,068,835	274,542	3 893157

2	Total of line 1, column (d).	2	8 834264
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	1 766853
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	747,880
5	Multiply line 4 by line 3.	5	1,321,394
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	0
7	Add lines 5 and 6.	7	1,321,394
8	Enter qualifying distributions from Part XII, line 4.	8	90,145

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See
the Part VI instructions

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a

Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1
Date of ruling or determination letter _____
(attach copy of letter if necessary—see instructions)

b

Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b

c

All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)

2

Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

2

0

3

Add lines 1 and 2.

3

0

4

Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

4

0

5

Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-

5

0

6

Credits/Payments

a

2015 estimated tax payments and 2014 overpayment credited to 2015

6a

b

Exempt foreign organizations—tax withheld at source

6b

c

Tax paid with application for extension of time to file (Form 8868).

6c

d

Backup withholding erroneously withheld

6d

7

Total credits and payments. Add lines 6a through 6d.

7

0

8

Enter any **penalty** for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.

8

9

Tax due. If the total of lines 5 and 8 is more than line 7, enter **amount owed**

9

0

10

Overpayment. If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid**.

10

11

Enter the amount of line 10 to be **Credited to 2015 estimated tax** ☐ **Refunded** ☐

11

Part VII-A

Statements Regarding Activities

1a

During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

1a

No

b

Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.

1b

No

c

Did the foundation file **Form 1120-POL** for this year?

1c

No

d

Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:
(1) On the foundation ☐ \$ _____ 0 (2) On foundation managers ☐ \$ _____ 0

e

Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ _____ 0

2

Has the foundation engaged in any activities that have not previously been reported to the IRS?
If "Yes," attach a detailed description of the activities.

2

No

3

Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*

3

No

4a

Did the foundation have unrelated business gross income of \$1,000 or more during the year?

4a

Yes

b

If "Yes," has it filed a tax return on **Form 990-T** for this year?

4b

Yes

5

Was there a liquidation, termination, dissolution, or substantial contraction during the year?
If "Yes," attach the statement required by General Instruction T.

5

No

6

Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:
• By language in the governing instrument, or
• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?

6

Yes

7

Did the foundation have at least \$5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV.*

7

Yes

8a

Enter the states to which the foundation reports or with which it is registered (see instructions)
☐ NC _____

b

If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation.*

8b

Yes

9

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?
If "Yes," complete Part XIV

9

Yes

10

Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses.*

10

No

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Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶N/A	13	Yes	
14	The books are in care of ▶THE ORGANIZATION Telephone no ▶(336) 379-1570 Located at ▶416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO NC ZIP +4 ▶27409			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶	15		
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶	16	Yes	No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? <input type="checkbox"/>	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/>	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.</i>) <input type="checkbox"/>	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a

During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Organizations relying on a current notice regarding disaster assistance check here.

☐

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
MARK BRAZIL	TOURNAMENT DIRECTOR	391,846	20,894	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409	40 00			
ROBERT POWELL	DIRECTOR OF OPERATIO	156,800	15,535	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409	40 00			
KELLY PINNIX	DIRECTOR OF FINANCE	156,000	9,935	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409	40 00			
TERRY JONES	DIRECTOR OF DEV & S	131,686	11,006	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409	40 00			
SHARON GRISCOM	TOURNAMENT COORDINAT	49,800	2,257	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409	40 00			
Total number of other employees paid over \$50,000.				0

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Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
PGA TOUR INC	PURSE, BACKGROUND CHECKS, ENTRY FEES	2,141,545
112 PGA TOUR BLVD PONTE VEDRA BEACH,FL 32082		
MCCONNELL GOLF LLC	FOOD/BEVERAGE, MAINTENANCE, MIN GUARANTY	626,250
400 DONALD ROSS DRIVE RALEIGH,NC 27610		
HORNE TIPPS TROPHY SUITES INC	LUXURY SUITES/INSTALLATION	293,221
8198 WOODLAND CENTER BLVD TAMPA,FL 33614		
AGGREKO LLC	PROVIDED AIR CONDITIONING FOR SPONSOR AREAS	149,182
4607 WEST ADMIRAL DOYLE DRIVE NEWIBERIA,LA 70560		
CHRISTIAN TOURS INC	CADDIE, GOLFER, MEDIA, SPECTATOR, VOLUNTEER BUSES	131,545
PO BOX 890 NEWTON,NC 28658		
Total number of others receiving over \$50,000 for professional services.		3

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 CONDUCTING A PREMIER PROFESSIONAL GOLF ASSOCIATION TOUR EVENT IN NORTH CAROLINA'S PIEDMONT TRIAD AND PROMOTING THE TRIAD AS AN ATTRACTIVE PLACE TO LIVE AND WORK	12,444,434
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3.	0

Part X

Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations,see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	1,815,663
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,815,663
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	1,815,663
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,067,783
5	Net value of noncharitable-use assets.Subtract line 4 from line 3 Enter here and on Part V, line 4	5	747,880
6	Minimum investment return.Enter 5% of line 5.	6	37,394

Part XI

Distributable Amount

(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	90,145
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions.Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	90,145
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	0
6	Adjusted qualifying distributions.Subtract line 5 from line 4.	6	90,145

Note:The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				
c From 2012.				
d From 2013.				
e From 2014.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ _____				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2015 distributable amount.				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . .				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2011.				
b Excess from 2012.				
c Excess from 2013.				
d Excess from 2014.				
e Excess from 2015.				

Part XIV

Private Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling.

b

Check box to indicate whether the organization is a private operating foundation described in section ☒ 4942(j)(3) or ☐ 4942(j)(5)

2a

Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

85% of line 2a

c

Qualifying distributions from Part XII, line 4 for each year listed

d

Amounts included in line 2c not used directly for active conduct of exempt activities

e

Qualifying distributions made directly for active conduct of exempt activities
Subtract line 2d from line 2c

3

Complete 3a, b, or c for the alternative test relied upon

a

"Assets" alternative test—enter
(1) Value of all assets
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b

"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .

c

"Support" alternative test—enter
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).
(3) Largest amount of support from an exempt organization
(4) Gross investment income

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	
37,394	0	0	0	37,394
31,785	0	0	0	31,785
90,145	854,744	521,350	642,660	2,108,899
382,571	446,208	342,898	432,411	1,604,088
-292,426	408,536	178,452	210,249	504,811
				0
				0
24,929	26,981	23,285	26,401	101,596
				0
				0
				0
				0

Part XV

Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

See Additional Data Table

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a

The name, address, and telephone number or email address of the person to whom applications should be addressed

b

The form in which applications should be submitted and information and materials they should include

c

Any submission deadlines

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Form 990-PF (2015)

Part XV

Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			3a	362,071
b Approved for future payment				
Total			3b	0

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2015)

l. Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting foundation to a noncharitable exempt organization of

(1) Cash.

(2) Other assets.

b Other transactions

(1) Sales of assets to a noncharitable exempt organization.

(2) Purchases of assets from a noncharitable exempt organization.

(3) Rental of facilities, equipment, or other assets.

(4) Reimbursement arrangements.

(5) Loans or loan guarantees. . . .

(6) Performance of services or membership or fundraising solicitations.

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	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 taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2016-05-10	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

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


Paid Preparer Use Only	Print/Type preparer's name JOHN M ROBINSON	Preparer's Signature	Date 2016-05-09	Check if self-employed <input checked="" type="checkbox"/>	PTIN P01281319
	Firm's name <input checked="" type="checkbox"/> BERNARD ROBINSON & COMPANY LLP			Firm's EIN <input checked="" type="checkbox"/> 56-0571159	
	Firm's address <input checked="" type="checkbox"/> PO BOX 19608 GREENSBORO, NC 274199608			Phone no (336) 294-4494	

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ROBERT E LONG JR	CHAIRMAN OF BOARD 6 25	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
JB DAVIS	VICE CHAIRMAN OF BOARD 1 00	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
WILLIAM H SMITH	TREASURER 0 50	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
STEVE BOWDEN	DIRECTOR 0 50	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
CAROLE BRUCE	DIRECTOR 0 50	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
JAMES B CROUCH JR	DIRECTOR 1 00	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
LOUIS DEJOY	DIRECTOR 0 75	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
PAUL FULTON	DIRECTOR 1 50	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
ALLEN E GANT JR	DIRECTOR 1 50	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
MIKE HALEY	DIRECTOR 0 75	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
GEORGE HOUSE	DIRECTOR 3 75	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
BILL JOHNSON	DIRECTOR 1 25	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
HAROLD L MARTIN SR	DIRECTOR 0 50	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
JOHN MCCONNELL	DIRECTOR 5 00	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
MACKEY MCDONALD	DIRECTOR 1 00	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
JIM MELVIN	DIRECTOR 3 75	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
T DAVID NEILL	DIRECTOR 0 50	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
TOM NOLAN	DIRECTOR 0 50	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
CARL PETTERSSON	DIRECTOR 0 25	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
FRED STARR	DIRECTOR 1 00	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
JOHN SWOFFORD	DIRECTOR 0 50	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
ROYSTER TUCKER III	DIRECTOR 0 50	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
THOMAS C WATKINS	DIRECTOR 0 50	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
DUNLOP WHITE III	DIRECTOR 0 50	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				
STEVEN B WIGGS	DIRECTOR 0 50	0	0	0
416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO, NC 27409				

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

ROBERT E LONG JR
MIKE HALEY
JOHN MCCONNELL

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN CANCER SOCIETY C/O 804 GREEN VALLEY ROAD SUITE 300 GREENSBORO, NC 27408	UNRELATED	PC	TO PROVIDE ASSISTANCE IN FINDING A CURE FOR CANCER	250
AMERICAN JUNIOR GOLF ASSOCIATION 1980 SPORTS CLUB DRIVE BRASELTON, GA 30517	UNRELATED	PC	TO PROVIDE OVERALL GROWTH AND DEVELOPMENT OF YOUNG MEN AND WOMEN WHO ASPIRE TO EARN COLLEGE GOLF SCHOLARSHIPS THROUGH COMPETITIVE JUNIOR GOLF	55,000
AMERICAN JUNIOR GOLF ASSOCIATION 1980 SPORTS CLUB DRIVE BRASELTON, GA 30517	UNRELATED	PC	TO PROVIDE OVERALL GROWTH AND DEVELOPMENT OF YOUNG MEN AND WOMEN WHO ASPIRE TO EARN COLLEGE GOLF SCHOLARSHIPS THROUGH COMPETITIVE JUNIOR GOLF	4,000
AMERICAN JUNIOR GOLF ASSOCIATION 1980 SPORTS CLUB DRIVE BRASELTON, GA 30517	UNRELATED	PC	TO PROVIDE OVERALL GROWTH AND DEVELOPMENT OF YOUNG MEN AND WOMEN WHO ASPIRE TO EARN COLLEGE GOLF SCHOLARSHIPS THROUGH COMPETITIVE JUNIOR GOLF	10,000
BACKPACK BEGINNINGS 1852 BANKING STREET 9024 GREENSBORO, NC 27408	UNRELATED	PC	TO PROVIDE CHILDREN IN NEED WITH NUTRITIOUS FOOD, COMFORT ITEMS OR CERTAIN BASIC NECESSITIES THROUGH THE USE OF BACKPACKS AND OTHER EFFICIENT MEANS	7,500
BLACK CHILD DEVELOPMENT INSTITUTE OF GREENSBORO INC 1200 EAST MARKET STREET GREENSBORO, NC 27401	UNRELATED	PC	TO PROVIDE DIRECT SERVICES TO CHILDREN AND YOUTH AND SERVES AS AN ADVOCATE FOR THEIR CONCERNS IN PUBLIC FORUMS AS WELL AS TO EDUCATE THE COMMUNITY ABOUT ISSUES FACING AFRICAN-AMERICAN AND OTHER CHILDREN	5,000
COMMUNITY FOUNDATION OF GREATER GREENSBORO INC 330 SOUTH GREENE STREET SUITE 100 GREENSBORO, NC 27401	UNRELATED	PC	TO MANAGE OVER 600 CHARITABLE FUNDS ESTABLISHED TO STRENGTHEN ITS COMMUNITIES BY PROVIDING SUPPORT TO A BROAD RANGE OF COMMUNITY NEEDS, NONPROFIT ORGANIZATIONS AND EDUCATIONAL OPPORTUNITIES	1,000
DAVIS LOVE FOUNDATION PO BOX 20344 ST SIMONS, GA 31522	UNRELATED	PC	TO CONTRIBUTE TO THE WELL-BEING AND PROGRESS OF SOCIETY BY SUPPORTING BOTH NATIONAL AND COMMUNITY-BASED PROGRAMS THAT FOCUS ON CHILDREN AND THEIR FAMILIES	50,000
DOVE HOUSE CHILDREN'S ADVOCACY CENTER INC 2407 SIMONTON ROAD STATESVILLE, NC 28625	UNRELATED	PC	TO PROVIDE A CENTRALIZED, SAFE AND CHILD FRIENDLY FACILITY FROM WHICH A MULTIDISCIPLINARY TEAM CONDUCTS INVESTIGATION AND INTERVENTION ACTIVITIES AND SUPPORTS THE PROCESS FOR OPTIMAL CASE RESOLUTION	2,000
DOVE HOUSE CHILDREN'S ADVOCACY CENTER INC 2407 SIMONTON ROAD STATESVILLE, NC 28625	UNRELATED	PC	TO PROVIDE A CENTRALIZED, SAFE AND CHILD FRIENDLY FACILITY FROM WHICH A MULTIDISCIPLINARY TEAM CONDUCTS INVESTIGATION AND INTERVENTION ACTIVITIES AND SUPPORTS THE PROCESS FOR OPTIMAL CASE RESOLUTION	475
EASTERN MUSIC FESTIVAL INC PO BOX 22026 GREENSBORO, NC 27420	UNRELATED	PC	TO PROMOTE MUSICAL ENRICHMENT, EXCELLENCE, PROFESSIONAL COLLABORATION, INNOVATION AND DIVERSITY THROUGH A NATIONALLY-RECOGNIZED TEACHING PROGRAM, MUSICAL FESTIVAL, CONCERTS AND OTHER PROGRAMS WHICH WILL ENHANCE THE QUALITY OF LIFE, HEALTH AND VITALITY OF OUR REGION	5,000
EASTERN MUSIC FESTIVAL INC PO BOX 22026 GREENSBORO, NC 27420	UNRELATED	PC	TO PROMOTE MUSICAL ENRICHMENT, EXCELLENCE, PROFESSIONAL COLLABORATION, INNOVATION AND DIVERSITY THROUGH A NATIONALLY-RECOGNIZED TEACHING PROGRAM, MUSICAL FESTIVAL, CONCERTS AND OTHER PROGRAMS WHICH WILL ENHANCE THE QUALITY OF LIFE, HEALTH AND VITALITY OF OUR REGION	5,000
EXCHANGE CLUB CENTER FOR THE PREVENTION OF CHILD ABUSE OF IREDELL COUNTY 207 WALNUT STREET STATESVILLE, NC 28677	UNRELATED	PC	TO PREVENT CHILD ABUSE AND NEGLECT IN IREDELL COUNTY, NC BY BUILDING POSITIVE PARENT/CHILD RELATIONSHIPS THROUGH EDUCATION, COUNSELING AND INTERVENTION PROGRAMS	1,500
FAMILY SERVICES OF THE PIEDMONT 902 BONNER DRIVE JAMESTOWN, NC 27282	UNRELATED	PC	TO FOCUS ON BUILDING SAFE AND HEALTY FAMILIES	1,000
FORSYTH BACKPACK PROGRAM 204 SURREY PATH COURT WINSTONSALEM, NC 27104	UNRELATED	PC	TO PROVIDE CHILDREN IN NEED WITH NUTRITIOUS FOOD, COMFORT ITEMS OR CERTAIN BASIC NECESSITIES THROUGH THE USE OF BACKPACKS AND OTHER EFFICIENT MEANS	7,500
Total.  3a				362,071

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
GOLF FORE FUN INC - THE FIRST TEE OF THE TRIAD PO BOX 236 CLEMMONS,NC 27012	UNRELATED	PC	TO IMPACT THE LIVES OF YOUNG PEOPLE BY PROVIDING LEARNING FACILITIES AND EDUCATIONAL PROGRAMS THAT PROMOTE CHARACTER DEVELOPMENT AND LIFE-ENHANCING VALUES THROUGH THE GAME OF GOLF	71,594
GRANDFATHER HOME FOR CHILDREN PO BOX 630858 CINCINNATI,OH 452630858	UNRELATED	PC	TO PROVIDE GENERAL SUPPORT	500
GREENSBORO CEREBRAL PALSY ASSOCIATION 3205 EAST WENDOVER AVENUE GREENSBORO,NC 27407	UNRELATED	PC	TO PROVIDE EDUCATION AND CARE TO MULTI-DISABLED INFANTS AND TODDLERS WITH SEVERE DEVELOPMENTAL DELAYS, AGED BIRTH TO THREE	13,152
HAAS FAMILY FOUNDATION C/O 104 SOUTH MAIN STREET SUITE 110 GREENVILLE,NC 29601	UNRELATED	PC	TO PROVIDE GENERAL SUPPORT	12,000
HOLY TRINITY CHURCH FOUNDATION INC 607 NORTH GREENE STREET GREENSBORO,NC 27401	UNRELATED	SO I	TO RECEIVE AND ADMINISTER GIFTS AND BEQUESTS AND EXPEND FUNDS AS APPROPRIATE FOR RELIGIOUS, CHARITABLE AND EDUCATIONAL PURPOSES	100
INTERNATIONAL MYELOMA FOUNDATION 12650 RIVERSIDE DRIVE SUITE 206 NORTH HOLLYWOOD,CA 91607	UNRELATED	PC	TO IMPROVE THE QUALITY OF LIFE OF MYELOMA PATIENTS WHILE WORKING TOWARD PREVENTION AND A CURE	100
MARCH OF DIMES 1220-G COMMERCE STREET CONOVER,NC 28613	UNRELATED	PC	TO IMPROVE THE HEALTH OF BABIES BY PREVENTING BIRTH DEFECTS, PREMATURE BIRTH AND INFANT MORTALITY	2,500
MATT GFELLER FOUNDATION 2880 GALSWORDTHY DRIVE WINSTON SALEM,NC 27106	UNRELATED	PC	TO PROVIDE FUNDS FOR COMPREHENSIVE RESEARCH AT THE MATTHEW GFELLER SPORT-RELATED TRAUMATIC BRAIN INJURY RESEARCH CENTER AT THE UNC CHAPEL HILL	2,500
NATIONAL MULTIPLE SCLEROSIS SOCIETY - CENTRAL NC CHAPTER 2211 WEST MEADOWVIEW ROAD GREENSBORO,NC 27407	UNRELATED	PC	TO MOBILIZE PEOPLE AND RESOURCES TO DRIVE RESEARCH FOR A CURE AND TO ADDRESS THE CHALLENGES OF EVERYONE AFFECTED BY MS	900
OPERATION SMILE 502 EAST CORNWALLIS DRIVE SUITE L GREENSBORO,NC 27405	UNRELATED	PC	TO PROVIDE FREE LIFE CHANGING SURGERY TO PEOPLE IN NEED ACROSS THE WORLD AND TO TRAIN LOCAL MEDICAL PROFESSIONALS, DONATE EQUIPMENT AND SUPPLIES AND EDUCATE THE PUBLIC	5,000
OUT OF THE GARDEN PROJECT PO BOX 4331 GREENSBORO,NC 27404	UNRELATED	PC	TO PROVIDE TANGIBLE SIGNS OF LOVE IN THE PIEDMONT TRIAD OF NC SO THAT NO CHILDREN GO TO BED HUNGRY	7,500
PIEDMONT TRAIID PARTNERSHIP 416 GALLIMORE DAIRY ROAD SUITE M GREENSBORO,NC 27409	UNRELATED	PC	TO SERVE AS A REGIONAL ORGANIZATION TO MARKET, ADVERTISE AND PROMOTE THE 12 COUNTY AREA OF THE PIEDMONT TRIAD REGION OF NORTH CAROLINA, FOR THE PURPOSE OF ENHANCING ECONOMIC DEVELOPMENT OPPORTUNITIES	50,000
ROOM AT THE INN OF THE CAROLINAS PO BOX 484 COLFAX,NC 27235	UNRELATED	PC	TO PROVIDE A UNIQUE, COMPREHENSIVE PROGRAM HELPING HOMELESS, SINGLE, PREGNANT WOMEN (WITH OR WITHOUT PREVIOUS CHILDREN), NOT ONLY DURING THEIR PREGNANCIES BUT ALSO AFTER THE BIRTH OF THEIR BABIES	1,500
SEDFEFIELD PRESBYTERIAN CHURCH (BACKPACK PROGRAM) 4216 WAYNE ROAD GREENSBORO,NC 27407	UNRELATED	PC	TO WORK IN PARTNERSHIP WITH SEDGEFIELD ELEMENTARY SCHOOL AND SECOND HARVEST FOOD BANK TO PROVIDE NUTRITIOUS FOOD TO CHILDREN IN NEED	2,500
SPECIAL OLYMPICS OF NORTH CAROLINA 2200 GATEWAY CENTER BLVD SUITE 201 MORRISVILLE,NC 275609122	UNRELATED	PC	TO PROVIDE A YEAR-ROUND SPORTS TRAINING AND COMPETITION IN A VARIETY OF OLYMPIC TYPE SPORTS FOR CHILDREN AND ADULTS WITH INTELLECTUAL DISABILITIES, GIVING THEM CONTINUING OPPORTUNITIES TO DEVELOP PHYSICAL FITNESS, DEMOSTRATE COURAGE, EXPERIENCE JOY AND PARTICIPATE IN THE SHARING OF GIFTS, SKILLS AND FRIENDSHIP WITH THEIR FAMILIES, OTHER SPECIAL OLYMPIC ATHLETES AND THE COMMUNITY	1,000
Total				362,071

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SPECIAL OLYMPICS OF NORTH CAROLINA 2200 GATEWAY CENTER BLVD SUITE 201 MORRISVILLE,NC 275609122	UNRELATED	PC	TO PROVIDE A YEAR-ROUND SPORTS TRAINING AND COMPETITION IN A VARIETY OF OLYMPIC TYPE SPORTS FOR CHILDREN AND ADULTS WITH INTELLECTUAL DISABILITIES, GIVING THEM CONTINUING OPPORTUNITIES TO DEVELOP PHYSICAL FITNESS, DEMONSTRATE COURAGE, EXPERIENCE JOY AND PARTICIPATE IN THE SHARING OF GIFTS, SKILLS AND FRIENDSHIP WITH THEIR FAMILIES, OTHER SPECIAL OLYMPIC ATHLETES AND THE COMMUNITY	5,000
THE CROSBY SCHOLARS COMMUNITY PARTNERSHIP 2701 UNIVERSITY PARKWAY WINSTONSALEM,NC 27105	UNRELATED	PC	TO PREPARE PUBLIC SCHOOL STUDENTS IN FORSYTH COUNTY FOR SUCCESSFUL COLLEGE ENROLLMENT	5,000
THE CROSBY SCHOLARS COMMUNITY PARTNERSHIP 2701 UNIVERSITY PARKWAY WINSTONSALEM,NC 27105	UNRELATED	PC	TO PREPARE PUBLIC SCHOOL STUDENTS IN FORSYTH COUNTY FOR SUCCESSFUL COLLEGE ENROLLMENT	5,000
THE SHRINERS HOSPITAL FOR CHILDREN C/O 5010 HIGH POINT ROAD GREENSBORO,NC 27407	UNRELATED	PC	TO PROVIDE THE HIGHEST QUALITY CARE TO CHILDREN WITH NEUROMUSCULOSKELETAL CONDITIONS, BURN INJURIES AND OTHER SPECIAL HEALTHCARE NEEDS WITHIN A COMPASSIONATE, FAMILY-CENTERED AND COLLABORATIVE CARE ENVIRONMENT	500
UNC-G EXCELLENCE FOUNDATION (BRIDGESTONE COLLEGIATE GOLF) PO BOX 26170 GREENSBORO,NC 27402	UNRELATED	SO I	TO PROVIDE FUNDS FOR THE SPARTAN ATHLETICS EXCELLENCE SCHOLARSHIP FUND	3,000
UNITED WAY OF HIGH POINT 201 CHURCH AVENUE HIGH POINT,NC 27262	UNRELATED	PC	TO DEVELOP RESOURCES AND PARTNERSHIPS THAT MAKE A MEASURABLE DIFFERENCE IN PEOPLE'S LIVES	7,500
WALKING FOR KIDS FOUNDATION PO BOX 3703 MERIDIAN,MO 39303	UNRELATED	PC	TO ALLOW PGA TOUR PROFESSIONALS AND SPORTS FANS THE OPPORTUNITY TO SUPPORT CHILDREN'S CHARITIES	10,000
Total				362,071

Form 990PF Part XVI-A Line 1 - Program service revenue:

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See the instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a WYNDHAM CHAMPIONSHIP					
b SPONSOR SALES					1,145,750
c HOSPITALITY					2,953,568
d TOURNAMENT ADMISSION					556,771
e CONCESSIONS, CLOTHING, AND PARKING					731,412
f SPONSORSHIP RECOGNITION					1,127,386
PARTY SPONSORSHIPS					72,700
TITLE SPONSOR, PGA REIMBURSEMENT, AND OTHER					6,046,601
ADVERTISING REVENUE - OFFICIAL TOURNAMENT PROGRAM	711210	22,200			
ADVERTISING REVENUE - OFFICIAL DAILY PAIRINGS GUIDE	711210	30,577			

TY 2015 Accounting Fees Schedule

Name: PIEDMONT TRIAD CHARITABLE FOUNDATION
D/B/A WYNDHAM CHAMPIONSHIP
EIN: 56-6085407

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	12,900	0	12,900	12,900

TY 2015 Cash Deemed Charitable Explanation Statement

Name: PIEDMONT TRIAD CHARITABLE FOUNDATION
D/B/A WYNDHAM CHAMPIONSHIP

EIN: 56-6085407

Explanation: BETWEEN JANUARY AND JULY, THE ORGANIZATION RECEIVES CASH SPONSORSHIPS AND CONTRIBUTIONS WHICH SUPPORT THE UPCOMING PROFESSIONAL GOLF ASSOCIATION TOUR EVENT. THIS CASH IS DEEMED HELD FOR CHARITABLE ACTIVITIES.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Gain/Loss from Sale of Other Assets Schedule

Name: PIEDMONT TRIAD CHARITABLE FOUNDATION

D/B/A WYNDHAM CHAMPIONSHIP

EIN: 56-6085407

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
QUICK BOOKS	2007-12	PURCHASED	2015-03			1,035		0		1,035
NEW HEADERS FOR STANDARDS & DRIVI	2007-08	PURCHASED	2015-06			721		0		721
MICROSOFT OFFICE 2007 PROFESSIONAL	2008-12	PURCHASED	2015-05			4,933		0		4,933
TOURNKEY COMPUTER PROGRAM	2008-12	PURCHASED	2015-03			5,000		0		5,000
MICROSOFT OFFICE 2007 LICENSE	2009-07	PURCHASED	2015-05			517		0		517
WINDOWS SMALL BUSINESS SERVER 08	2010-03	PURCHASED	2015-05			12,875		0		12,875
(5) 50" BREEZEMASTER FANS & BASES	2010-08	PURCHASED	2015-03			43,144		0	-3,595	39,549
(2) 50" BREEZEMASTER FANS & BASES	2010-08	PURCHASED	2015-03			17,933		0	-1,794	16,139

TY 2015 General Explanation Attachment

Name: PIEDMONT TRIAD CHARITABLE FOUNDATION
D/B/A WYNDHAM CHAMPIONSHIP

EIN: 56-6085407

Identifier	Return Reference	Explanation
	PART V, LINE 1, COLUMN (B) AND PART XIV, LINE 2C, COLUMN (D)	QUALIFYING DISTRIBUTIONS FOR 2011 HAVE BEEN ADJUSTED TO ACCOUNT FOR INCOME GENERATED BY THE WYNDHAM CHAMPIONSHIP GOLF TOURNAMENT

TY 2015 Land, Etc.
 Schedule

Name: PIEDMONT TRIAD CHARITABLE FOUNDATION
 D/B/A WYNDHAM CHAMPIONSHIP
 EIN: 56-6085407

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
HP LABTOP (VOLUNTEERS)	937	937	0	
HP LABTOP (CLAI)	611	611	0	
4 HP LAPTOPS (MARK, STEVE, BOBBY, KELLY))	7,647	7,647	0	
HP LAPTOP (SHARON)	2,036	1,968	68	68
PROJECTOR	500	417	83	83
HP LAPTOP (TERRY)	1,315	986	329	329
HP PROLIANT SERVER	15,837	2,112	13,725	13,725
OFFICE FURNITURE (KELLY'S OFFICE)	2,036	2,036	0	
PERPETUAL TROPHY	6,945	6,945	0	
FENCING FROM SIGNATURE SYSTEMS	8,000	8,000	0	
42IN PICKET FENCING 80 SECTIONS	8,394	8,394	0	
42" PICKET PANEL FENCING	8,376	8,376	0	
EPI SUITE LITE USB HUB	816	816	0	
40 PIECES WHILE PLASTIC FENCING 42" X 6'	4,080	4,080	0	
50 PIECES CROWD CONTROL BARRICADE W/2 FLAT FT	4,450	4,450	0	
27 COURSE PIN FLAGS	1,009	1,009	0	
FLAGS FOR BRANDING AROUND BLEACHERS	2,452	2,452	0	
CADDIE BIBS	3,304	3,304	0	
1/3 OF SIGNAGE FOR WYNDHAM TOURNAMENT	7,301	7,301	0	
RE-ROUTING OF CABLES ON COURSE	5,582	5,582	0	
PHONE LINE TERMINALS FOR SHOTLINK	3,693	3,693	0	
SHELVING & DOCK BOARD - WAREHOUSE	8,495	8,495	0	
CREDENTIAL MACHINE	3,564	3,564	0	
DRIVING RANGE NETTING	51,476	51,476	0	
BARRICADE COVERS	4,204	4,204	0	
ARTWOKR & FRAMING - MEN'S LOCKER ROOM	5,133	5,133	0	
(5) WC RUGS FOR CLUBHOUSE	8,414	8,414	0	
(6) ARMLESS PADDINGTON LEATHER BAR STOOLS	2,850	2,850	0	
WC SIGNAGE FOR SCC	41,706	41,706	0	
6 DECKBOXES	842	842	0	

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
(11) SCOREBOARD HEADER PANELS	3,878	3,878	0	
FENCE AT CART SHED	2,865	2,865	0	
5 COOL-MIST FANS	4,250	4,250	0	
CADDIE BIBS	2,725	2,725	0	
(2) COOL-MIST FANS	1,590	1,590	0	
FABRICATED ALUM HEADER SIGN FOR SCOREBOARD	1,568	1,515	53	53
IPADS (MARK, BOBBY, STEVE, TERRY, & KELLY)	3,906	3,646	260	260
TEEBOX COOLERS	3,609	3,188	421	421
RECYCLING CONTAINERS	7,048	6,225	823	823
DOWNTOWN STREET BANNERS	8,583	7,438	1,145	1,145
TIKI BARS & CUBBY SHELF	6,000	4,100	1,900	1,900
SIGN REVISIONS	7,000	4,433	2,567	2,567
STANDARD BEARER SIGNS	11,059	5,714	5,345	5,345
BARRICADE COVERS	4,188	2,024	2,164	2,164
PALM & BAMBOO FAKE FOLIAGE PLANTS	4,107	1,985	2,122	2,122
CADDIE BIBS	5,154	4,152	1,002	1,002
ADIRONDACK CHAIRS	2,700	1,260	1,440	1,440
WILL-CALL DECK,TRAILER RAMP, WALLSCREEN ETC	7,600	3,547	4,053	4,053
HOLE SIGNS	15,564	4,410	11,154	11,154
SERVING COUNTERS, TIKI BAR, LEGENDS BAR	15,000	4,250	10,750	10,750
HISTORY WALL	26,688	7,561	19,127	19,127
CREDENTIAL MACHINE	5,319	709	4,610	4,610
PARKING LOT, EXPANSION + CART PATHS	114,578	13,367	101,211	101,211
CART PATHS	5,330	622	4,708	4,708
NEW HEADERS FOR STANDARDS & DRIVING RANGE SIG	721	721	0	
2002 CHEVY SILVERADO	10,797	10,797	0	
2000 CHEVY SUBURBAN	7,385	7,385	0	
2013 CADILLAC ATS	46,463	17,812	28,651	28,651

TY 2015 Legal Fees Schedule

Name: PIEDMONT TRIAD CHARITABLE FOUNDATION
D/B/A WYNDHAM CHAMPIONSHIP
EIN: 56-6085407

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	3,681	0	3,681	3,681

TY 2015 Mortgages and Notes Payable Schedule

Name: PIEDMONT TRIAD CHARITABLE FOUNDATION
D/B/A WYNDHAM CHAMPIONSHIP

EIN: 56-6085407

Total Mortgage Amount:

Item No.	1
Lender's Name	BRANCH BANKING & TRUST COMPANY
Lender's Title	
Relationship to Insider	NONE
Original Amount of Loan	150,000
Balance Due	0
Date of Note	2006-12
Maturity Date	2017-05
Repayment Terms	INTEREST IS TO BE PAID MONTHLY.
Interest Rate	4.000000000000
Security Provided by Borrower	EQUIPMENT RECEIVABLE
Purpose of Loan	LINE OF CREDIT
Description of Lender Consideration	NONE
Consideration FMV	

Item No.	2
Lender's Name	BRANCH BANKING & TRUST COMPANY
Lender's Title	
Relationship to Insider	NONE
Original Amount of Loan	6,400,000
Balance Due	4,625,167
Date of Note	2008-02
Maturity Date	2016-05
Repayment Terms	ACCRUED INTEREST MONTHLY; PRINCIPAL \$250,000/YEAR; BALANCE DUE 5/15/16.
Interest Rate	3.000000000000
Security Provided by Borrower	BANK & INVESTMENT ACCOUNTS; GUARANTEED BY OTHER TRUST AND OTHER FOUNDATION.
Purpose of Loan	BUYOUT OF LONG-TERM LEASE.
Description of Lender Consideration	NONE
Consideration FMV	

Item No.	3
Lender's Name	BRANCH BANKING & TRUST COMPANY
Lender's Title	
Relationship to Insider	NONE
Original Amount of Loan	600,000
Balance Due	0
Date of Note	2010-12
Maturity Date	2017-05
Repayment Terms	INTEREST IS TO BE PAID MONTHLY.
Interest Rate	4.000000000000
Security Provided by Borrower	UNSECURED
Purpose of Loan	LINE OF CREDIT
Description of Lender Consideration	NONE
Consideration FMV	

TY 2015 Other Assets Schedule**Name:** PIEDMONT TRIAD CHARITABLE FOUNDATION

D/B/A WYNDHAM CHAMPIONSHIP

EIN: 56-6085407

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
TOURNAMENT ACQUISITION COST	543,134	543,134	543,134
LESS ACCUMULATED AMORTIZATION	-366,360	-420,674	-420,674
DEPOSITS	82,000	57,302	57,302

TY 2015 Other Expenses Schedule

Name: PIEDMONT TRIAD CHARITABLE FOUNDATION

D/B/A WYNDHAM CHAMPIONSHIP

EIN: 56-6085407

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RENT	244,367	0	244,367	244,367
PURSE, PERSONNEL, AND GENERAL GOLF TOURNAMENT EXPENSES	5,755,979	0	5,755,979	5,761,424
TOURNAMENT OPERATIONS	2,447,524	0	2,447,524	2,432,560
COURSE SALES (CLOTHING, CONCESSIONS, TICKETS)	605,815	0	605,815	606,681
MEDIA	350,956	0	350,956	347,401
HOSPITALITY	1,064,518	0	1,064,518	1,056,295
GENERAL AND ADMINISTRATIVE EXPENSES	122,112	0	122,112	129,229
CONSULTING FEES	287,500	0	287,500	287,500
OFFICIAL TOURNAMENT PROGRAM EXPENSES	10,336	0	10,336	0
OFFICIAL DAILY PAIRINGS GUIDE EXPENSES	19,849	0	19,849	0
AMORTIZATION	54,313	0	54,313	0
LESS WYNDHAM CHAMPIONSHIP INCOME	0	0	0	-12,634,188

TY 2015 Other Income Schedule**Name:** PIEDMONT TRIAD CHARITABLE FOUNDATION

D/B/A WYNDHAM CHAMPIONSHIP

EIN: 56-6085407

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
SPONSOR SALES	1,145,750		1,145,750
HOSPITALITY	2,953,568		2,953,568
TOURNAMENT ADMISSION	556,771		556,771
CONCESSIONS, CLOTHING, AND PARKING	731,412		731,412
SPONSORSHIP RECOGNITION	1,127,386		1,127,386
PARTY SPONSORSHIPS	72,700		72,700
TITLE SPONSOR, PGA REIMBURSEMENT, AND OTHER	6,046,601		6,046,601
ADVERTISING REVENUE - OFFICIAL TOURNAMENT PROGRAM	22,200		22,200
ADVERTISING REVENUE - OFFICIAL DAILY PAIRINGS GUIDE	30,577		30,577

TY 2015 Taxes Schedule**Name:** PIEDMONT TRIAD CHARITABLE FOUNDATION

D/B/A WYNDHAM CHAMPIONSHIP

EIN: 56-6085407

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	64,374	0	64,374	64,374
UNRELATED BUSINESS INCOME TAX	5,588	0	5,588	0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>.	OMB No 1545-0047
		2015

Name of the organization PIEDMONT TRIAD CHARITABLE FOUNDATION D/B/A WYNDHAM CHAMPIONSHIP	Employer identification number 56-6085407
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Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

- ☒
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- ☐
- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- ☐
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- ☐
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization PIEDMONT TRIAD CHARITABLE FOUNDATION D/B/A WYNDHAM CHAMPIONSHIP	Employer identification number 56-6085407
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Part I

Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table <div></div> <div></div>	\$ <div></div>	Person Payroll Noncash <div>(Complete Part II for noncash contribution)</div>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	<div></div> <div></div> <div></div>	\$ <div></div>	Person Payroll Noncash <div>(Complete Part II for noncash contribution)</div>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	<div></div> <div></div> <div></div>	\$ <div></div>	Person Payroll Noncash <div>(Complete Part II for noncash contribution)</div>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	<div></div> <div></div> <div></div>	\$ <div></div>	Person Payroll Noncash <div>(Complete Part II for noncash contribution)</div>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	<div></div> <div></div> <div></div>	\$ <div></div>	Person Payroll Noncash <div>(Complete Part II for noncash contribution)</div>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	<div></div> <div></div> <div></div>	\$ <div></div>	Person Payroll Noncash <div>(Complete Part II for noncash contribution)</div>

Part II **Noncash Property**
(see instructions) Use duplicate copies of Part II if additional space is needed

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization PIEDMONT TRIAD CHARITABLE FOUNDATION D/B/A WYNDHAM CHAMPIONSHIP	Employer identification number 56-6085407
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Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		

Additional Data

Software ID:

Software Version:

EIN: 56-6085407

Name: PIEDMONT TRIAD CHARITABLE FOUNDATION
D/B/A WYNDHAM CHAMPIONSHIP

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<div>1</div>	BB&T		<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	1100 REYNOLDS BLVD THIRD FLOOR	\$ 10,000	
	WINSTONSALEM, NC 27105		
<div>2</div>	TECHNOLOGY CONCEPTS AND DESIGN INC		<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	4510 WEYBRIDGE LANE	\$ 10,000	
	GREENSBORO, NC 27407		
<div>3</div>	GLEN RAVEN INC		<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	1831 NORTH PARK AVENUE	\$ 5,287	
	GLEN RAVEN, NC 27217		
<div>4</div>	AMERICAN JUNIOR GOLF ASSOCIATION		<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	1980 SPORTS CLUB DRIVE	\$ 27,000	
	BRASELTON, GA 30517		
<div>5</div>	THE JOSEPH M BRYAN FOUNDATION OF GREATER GSO INC		<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	PO BOX 26040	\$ 110,000	
	GREENSBORO, NC 27420		
<div>6</div>	STANLEY AND DOROTHY FRANK FAMILY FOUNDATION		<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	PO BOX 9010	\$ 5,000	
	GREENSBORO, NC 274290010		

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>	THE COMMUNITY FOUNDATION	<u>\$ 162,500</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	330 S GREENE STREET SUITE 100		
	GREENSBORO, NC 27401		
<u>8</u>	BELL FOUNDATION	<u>\$ 10,000</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	PO BOX 3288		
	GREENSBORO, NC 27402		
<u>9</u>	THE MICHAEL W HALEY FOUNDATION INC	<u>\$ 40,000</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	11911 US HWY ONE SUITE 201		
	NORTH PALM BEACH, FL 33408		
<u>10</u>	FRED STARR	<u>\$ 5,000</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	5506 ROCKINGHAM ROAD EAST		
	GREENSBORO, NC 27407		
<u>11</u>	XPO LOGISTICS	<u>\$ 5,000</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	PO BOX 18367		
	GREENSBORO, NC 274198367		
<u>12</u>	CHARLES AND CHERYL MCQUEARY	<u>\$ 5,000</u>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	10 CRESWELL COURT		
	GREENSBORO, NC 27407		

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13			Person <input checked="" type="checkbox"/>
	J ROBERT STOUT		Payroll <input checked="" type="checkbox"/>
	5500 WAYNE ROAD	\$ 5,000	Noncash
	GREENSBORO, NC 27407		(Complete Part II for noncash contribution)
14	PGA TOUR INC		Person <input checked="" type="checkbox"/>
			Payroll <input checked="" type="checkbox"/>
	100 PGA TOUR BLVD	\$ 205,000	Noncash
	PONTE VEDRA BEACH, FL 32082		(Complete Part II for noncash contribution)
15	WISHES BY WYNDHAM CHARITABLE FOUNDATION		Person <input checked="" type="checkbox"/>
			Payroll <input checked="" type="checkbox"/>
	22 SYLVAN WAY	\$ 375,000	Noncash
	PARSIPPANY, NJ 07054		(Complete Part II for noncash contribution)
16	THE WINSTON-SALEM FOUNDATION		Person <input checked="" type="checkbox"/>
			Payroll <input checked="" type="checkbox"/>
	380 KNOLLWOOD STREET SUITE 610	\$ 10,000	Noncash
	WINSTONSALEM, NC 27103		(Complete Part II for noncash contribution)
17			Person <input checked="" type="checkbox"/>
	KENNETH D MILLER		Payroll <input checked="" type="checkbox"/>
	300 N GREENE STREET SUITE 1750	\$ 5,000	Noncash
	GREENSBORO, NC 27401		(Complete Part II for noncash contribution)
18	HONDA AIRCRAFT COMPANY		Person <input checked="" type="checkbox"/>
			Payroll <input checked="" type="checkbox"/>
	6430 BALLINGER ROAD	\$ 5,000	Noncash
	GREENSBORO, NC 27410		(Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<div>19</div>	LINCOLN FINANCIAL GROUP	\$ 30,000	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	100 N GREENE STREET		
	GREENSBORO , NC 27401		
<div>20</div>	THE TRUST COMPANY OF THE SOUTH	\$ 5,000	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	3041 S CHURCH STREET		
	BURLINGTON, NC 27215		
<div>21</div>	WEAVER FOUNDATION	\$ 10,000	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	PO BOX 26040		
	GREENSBORO , NC 27420		
<div>22</div>	PIEDMONT TRIAD PARTNESHIP	\$ 8,000	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	416 GALLIMORE DAIRY ROAD SUITE M		
	GREENSBORO , NC 27409		
<div>23</div>	THE LOOKOUT FOUNDATION	\$ 5,000	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	300 N GREENE STREET SUITE 1750		
	GREENSBORO , NC 27401		