


Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 10-01-2015 , and ending 09-30-2016

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization
TIGER WOODS FOUNDATION INC

% HOOD & BURCH INC

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite

1 TIGER WOODS WAY

City or town, state or province, country, and ZIP or foreign postal code
ANAHEIM, CA 92801

F Name and address of principal officer
RICK SINGER
121 INNOVATION DR STE 150
IRVINE, CA 92617

H(a) Is this a group return for subordinates?

No

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

D Employer identification number
20-0677815

E Telephone number
(949) 725-3003

G Gross receipts \$ 14,500,582

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.TIGERWOODSFOUNDATION.ORG

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 2004

M State of legal domicile CA

Part I Summary				
Activities & Governance	1 Briefly describe the organization's mission or most significant activities TIGER WOODS FOUNDATION, A NON-PROFIT PUBLIC BENEFIT CORPORATION, THAT OPERATES SCHOOL FACILITIES THAT PROVIDE EDUCATIONAL OPPORTUNITIES FOR YOUTH			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3 Number of voting members of the governing body (Part VI, line 1a)	3	28	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	27	
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	60	
	6 Total number of volunteers (estimate if necessary)	6	72	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0	
Revenue	b Net unrelated business taxable income from Form 990-T, line 34	7b		
	8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	Prior Year	Current Year	
		5,774,263	6,760,534	
		281,702	33,162	
		3,650,843	2,383,360	
		5,994	4,923	
Expenses		9,712,802	9,181,979	
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶1,021,073 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12	878,146	1,007,657		
	0	0		
	3,530,408	3,789,575		
	0	199,317		
	Net Assets or Fund Balances			
			4,438,603	5,179,583
			8,847,157	10,176,132
			865,645	-994,153
	20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20	Beginning of Current Year	End of Year	
		102,670,602	106,716,566	
		13,365,243	14,815,541	
		89,305,359	91,901,025	

Part II Signature Block

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

Sign Here

Signature of officer

RICK SINGER PRES/SEC/CEO

Type or print name and title

2017-08-15

Date

Paid Preparer Use Only

Print/Type preparer's name
CAREY MCKEE

Preparer's signature
CAREY MCKEE

Date

Check ☐ if self-employed

PTIN
P01281067

Firm's name ▶ KPMG LLP

Firm's EIN ▶

Firm's address ▶ 550 S Hope St Suite 1500

Phone no (213) 972-4000

Los Angeles, CA 90071

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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990(2015)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

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

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O

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

4a	(Code) (Expenses \$ 6,654,788 including grants of \$) (Revenue \$ 33,162) See Additional Data
4b	(Code) (Expenses \$ 904,687 including grants of \$ 880,475) (Revenue \$) See Additional Data
4c	(Code) (Expenses \$ 174,289 including grants of \$ 97,382) (Revenue \$) See Additional Data See Additional Data
4d	Other program services (Describe in Schedule O) (Expenses \$ 68,157 including grants of \$ 29,800) (Revenue \$)
4e	Total program service expenses ► 7,801,921

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
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		No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	Yes	
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	Yes	
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		No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	Yes	
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		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	26	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	60	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		No
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).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		No
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI

Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

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

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	CA , CT , DC , FL , GA , MD , MA , NY , OR , PA , SC , VA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, address, and telephone number of the person who possesses the organization's books and records HOOD BURCH INC 10833 VALLEY VIEW STREET SUITE 470 CYPRESS, CA 90630 (714) 995-4833	

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

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

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

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

[illegible]

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,057,835	337,950	174,588

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 7

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ALGONQUIN ADVISORS LLC, 2 GREENWICH OFFICE PARK 2ND FLOOR GREENWICH, CT 06831	INVESTMENT ADVISOR	189,250
MLB ADVANCED MEDIA LP, PO BOX 417171 BOSTON, MA 022417171	WEBSITE/MEDIA SVC	200,000
EXCEL SPORTS MANAGEMENT, 1700 BROADWAY 29TH FLOOR NEW YORK, NY 10019	MARKETING	150,000
KPMG LLP, PO BOX 120922 DALLAS, TX 75312	ACCOUNTING	109,544
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 4		

Part VIII

Statement of Revenue

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

☒

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	6,164					
	b	Membership dues	1b						
	c	Fundraising events	1c						
	d	Related organizations	1d	1,517,600					
	e	Government grants (contributions)	1e						
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	5,236,770					
	g	Noncash contributions included in lines 1a-1f \$		6,124					
	h	Total. Add lines 1a-1f ▶						6,760,534	
Program Service Revenue	2a	CLASS REGISTRATION	Business Code	611600	33,162	33,162			
	b								
	c								
	d								
	e								
	f	All other program service revenue							
	g	Total. Add lines 2a-2f ▶			33,162				
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		1,406,741			1,406,741	
4		Income from investment of tax-exempt bond proceeds . . ▶		0					
5		Royalties ▶		0					
6a		(i) Real		(ii) Personal					
		Gross rents		250					
		Less rental expenses							
		Rental income or (loss)		250					0
d		Net rental income or (loss) ▶		250			250		
7a		(i) Securities		(ii) Other					
		Gross amount from sales of assets other than inventory		6,295,222					
		Less cost or other basis and sales expenses		5,318,603					
		Gain or (loss)		976,619					
d		Net gain or (loss) ▶		976,619			976,619		
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18							
a									
b		Less direct expenses							
c		Net income or (loss) from fundraising events . . ▶		0					
9a		Gross income from gaming activities See Part IV, line 19							
a									
b		Less direct expenses							
c		Net income or (loss) from gaming activities . . . ▶		0					
10a		Gross sales of inventory, less returns and allowances							
a									
b	Less cost of goods sold								
c	Net income or (loss) from sales of inventory . . ▶		0						
Miscellaneous Revenue			Business Code						
11a	REBATES		900099	4,462			4,462		
b	GOLF TOKENS		900099	200			200		
c	MISC REVENUE		900099	11			11		
d	All other revenue								
e	Total. Add lines 11a-11d ▶			4,673					
12	Total revenue. See Instructions ▶			9,181,979	33,162		2,388,283		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	845,958	845,958		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	127,182	127,182		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	34,517	34,517		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	875,270	536,019	114,870	224,381
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	2,158,367	1,790,427	216,109	151,831
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	82,991	65,072	8,485	9,434
9	Other employee benefits	447,773	350,161	45,943	51,669
10	Payroll taxes	225,174	176,155	22,957	26,062
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	58,953	41,355	7,287	10,311
c	Accounting	210,947	11,244	196,899	2,804
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	199,317			199,317
f	Investment management fees	339,852		339,852	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	319,600	218,714	39,875	61,011
12	Advertising and promotion	343,059	240,779	42,581	59,699
13	Office expenses	200,957	158,911	24,075	17,971
14	Information technology	304,069	210,297	39,637	54,135
15	Royalties	0			
16	Occupancy	798,918	657,476	62,353	79,089
17	Travel	184,915	122,770	31,861	30,284
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	120,962	72,251	30,697	18,014
20	Interest	416,929	412,760	4,169	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	729,716	624,819	104,897	
23	Insurance	200,109	155,592	20,121	24,396
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	PROJECT DEVELOPMENT	600,340	600,340		
b	PROGRAM SUPPLIES	115,497	115,497		
c	STUDENT TRANSPORTATION	48,757	48,757		
d	SUMMER ACADEMY	33,280	33,280		
e	All other expenses	152,723	151,588	470	665
25	Total functional expenses. Add lines 1 through 24e	10,176,132	7,801,921	1,353,138	1,021,073
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		5,448	1	2,442
	2	Savings and temporary cash investments		6,022,583	2	11,574,279
	3	Pledges and grants receivable, net		5,115,584	3	1,498,127
	4	Accounts receivable, net		2,179	4	2,105
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		0	6	0
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		125,575	9	100,816
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	17,322,940		
	b	Less: accumulated depreciation	10b	7,454,087	10c	9,868,853
	11	Investments—publicly traded securities		55,401,312	11	57,123,710
	12	Investments—other securities. See Part IV, line 11		24,365,777	12	26,053,164
	13	Investments—program-related. See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets. See Part IV, line 11		1,045,558	15	493,070
16	Total assets. Add lines 1 through 15 (must equal line 34)		102,670,602	16	106,716,566	
Liabilities	17	Accounts payable and accrued expenses		619,849	17	374,578
	18	Grants payable		272,500	18	234,500
	19	Deferred revenue		0	19	0
	20	Tax-exempt bond liabilities		10,040,299	20	9,650,499
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		0	23	0
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		2,432,595	25	4,555,964
	26	Total liabilities. Add lines 17 through 25		13,365,243	26	14,815,541
	Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
27		Unrestricted net assets		74,762,911	27	82,238,121
28		Temporarily restricted net assets		14,542,448	28	9,662,904
29		Permanently restricted net assets		0	29	0
Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.						
30		Capital stock or trust principal, or current funds			30	
31		Paid-in or capital surplus, or land, building or equipment fund			31	
32		Retained earnings, endowment, accumulated income, or other funds			32	
33		Total net assets or fund balances		89,305,359	33	91,901,025
34		Total liabilities and net assets/fund balances		102,670,602	34	106,716,566

Part 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	9,181,979
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,176,132
3	Revenue less expenses Subtract line 2 from line 1	3	-994,153
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	89,305,359
5	Net unrealized gains (losses) on investments	5	3,794,359
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	-204,540
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	91,901,025

Part XII

Financial Statements and Reporting

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

☐

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:**Software Version:**

EIN: 20-0677815

Name: TIGER WOODS FOUNDATION INC

Form 990, Part III, Line 4a

4a	(Code) (Expenses \$ 6,654,788 including grants of \$) (Revenue \$ 33,162)
	TIGER WOODS LEARNING CENTERS SINCE INCEPTION, THE TIGER WOODS LEARNING CENTERS (TWLC) HAS PROVIDED STEM-BASED EDUCATION PROGRAMS FOR YOUTH IN SEVERAL LOCATIONS THE UNIQUE LEARNING ENVIRONMENT WAS INSPIRED BY THE VISION OF TIGER WOODS TO PROVIDE YOUTH WITH A SAFE PLACE TO LEARN, RECOGNIZE THEIR POTENTIAL, AND CREATE A ROADMAP TO COLLEGE IN 2016, TWLC STARTED TO DEVELOP DIGITAL CURRICULUM TO MAKE IT AVAILABLE TO TEACHERS WORLDWIDE CONTINUED ON SCHEDULE O

Form 990, Part III, Line 4b

4b (Code) (Expenses \$ 904,687 including grants of \$ 880,475) (Revenue \$)

TIGER WOODS FOUNDATION GRANT-MAKING PROGRAM THE TIGER WOODS FOUNDATION GRANT-MAKING PROGRAM PRIMARILY FOCUSES ON PROVIDING FUNDING TO ORGANIZATIONS THAT SPECIALIZE IN EDUCATION AND YOUTH DEVELOPMENT SPECIFICALLY, THE GRANT PROGRAM SERVES 501(C)(3) ORGANIZATIONS THAT ENHANCE THE LEARNING PROCESS FOR YOUTH THIS PROGRAM SUPPORTS ORGANIZATIONS, PROGRAMS AND PROJECTS BY INVITATION ONLY AND SUBJECT TO PRE AND POST QUALIFICATIONS SUBJECT TO APPLICABLE 501(C)(3) GUIDELINES

Form 990, Part III, Line 4c

4c (Code) (Expenses \$ 174,289 including grants of \$ 97,382) (Revenue \$)

EARL WOODS SCHOLARSHIP PROGRAM IN CELEBRATION OF TIGER'S FATHER EARL AND HIS LIFELONG DEDICATION TO HELPING YOUNG PEOPLE ACHIEVE THEIR DREAMS, THE TIGER WOODS FOUNDATION (TWF) CREATED THE EARL WOODS SCHOLARS (EWS) PROGRAM NEARLY 149 SCHOLARS HAVE MATRICULATED THROUGH THE PROGRAM THE EWS RECIPIENTS ATTEND PRESTIGIOUS SCHOOLS NATIONWIDE, SUCH AS NYU, PITZER COLLEGE, STANFORD, AND UCLA, TO NAME A FEW SCHOLARS ARE ANNUALLY AWARDED A FOUR-YEAR RENEWABLE SCHOLARSHIP UP TO \$20,000 FOR THE TERM CONTINUED ON SCHEDULE O

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	68,157	including grants of \$	29,800) (Revenue \$)
LEARNING CENTER OUTREACH PROGRAM						

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RICK SINGER PRES/SEC/CEO	25 0 40 0	X		X				145,350	337,950	53,883
MICHAEL D MCKEE CHAIRMAN	1 0 0 0	X		X				0	0	0
RICHARD BAILY DIRECTOR	1 0 0 0	X						0	0	0
SANDRA BARRY DIRECTOR	1 0 0 0	X						0	0	0
KENNETH W BENTLEY DIRECTOR	1 0 0 0	X						0	0	0
AVERY BROWN DIRECTOR	1 0 0 0	X						0	0	0
DANNY CONWAY DIRECTOR	1 0 0 0	X						0	0	0
DALE L DYKEMA DIRECTOR	1 0 0 0	X						0	0	0
KARINA HAMILTON DIRECTOR	1 0 0 0	X						0	0	0
PAUL HEGNESS DIRECTOR	1 0 0 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHRISTOPHER J HUBMAN DIRECTOR	10 00	X						0	0	0
GREG JONES DIRECTOR	10 00	X						0	0	0
DENNIS KUHL DIRECTOR	10 00	X						0	0	0
ROB LIGHT DIRECTOR	10 00	X						0	0	0
ED MACHIR DIRECTOR	10 00	X						0	0	0
JASON MOONEYHAM DIRECTOR	10 00	X						0	0	0
JONATHAN ORSZAG DIRECTOR	10 00	X						0	0	0
THOMAS PARHAM PHD DIRECTOR	10 00	X						0	0	0
SUDHAKAR V SHENOY DIRECTOR	10 00	X						0	0	0
MARK STEINBERG DIRECTOR	10 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
TOM TAIT DIRECTOR	1 0 0 0	X						0	0	0
TODD C THEODORA DIRECTOR	1 0 0 0	X						0	0	0
PAT TRAMMELL DIRECTOR	1 0 0 0	X						0	0	0
LEO TUCKER DIRECTOR	1 0 0 0	X						0	0	0
PETER V UEBERROTH DIRECTOR	1 0 0 0	X						0	0	0
BOB WALTOS DIRECTOR	1 0 0 0	X						0	0	0
BILL WOODLEY DIRECTOR	1 0 0 0	X						0	0	0
KUTILDA WOODS DIRECTOR	1 0 0 0	X						0	0	0
JIN THATCHER VP OPERATIONS & ADMINISTRATION	49 0 1 0			X				207,405	0	34,719
KATHERINE BIHR VP PROGRAMS & EDUCATION	40 0 0 0				X			192,616	0	15,212

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MICHELLE S KIM VP STRATEGIC PARTNERSHIPS	40 0 0 0					X		187,207	0	9,942
GYLA BELL SR DIRECTOR LEARNING CENTERS	40 0 0 0					X		112,019	0	11,550
CRISTINA L FERNANDEZ SR DIRECTOR PROGRAMS	40 0 0 0					X		104,107	0	21,614
STACY STARK VP EVENTS	40 0 0 0					X		109,131	0	27,668

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
TIGER WOODS FOUNDATION INC

Employer identification number
20-0677815

Part I

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

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

- 1

☐

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

☒

A school described in **section 170(b)(1)(A)(ii).**(Attach Schedule E (Form 990 or 990-EZ))
- 3

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations _____
- g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years.If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ►						<input type="checkbox"/>

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	
15 Public support percentage for 2014 Schedule A , Part II, line 14	15	
16a 33 1/3% support test—2015.If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test—2014.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		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2015.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		<input checked="" type="checkbox"/>
b 10%-facts-and-circumstances test—2014.If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation.If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV 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.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
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 Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
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 Part VI when and how the organization 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.		
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.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
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 all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported 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).		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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 .		
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).		
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 II of Schedule L (Form 990).		
9a 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 Part VI .		
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 Part VI .		
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 .		
10a 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.		
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.)		
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

	Yes	No
<div>1</div> <div>Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i></div>		
<div>2</div> <div>Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i></div>		

Section C. Type II Supporting Organizations

	Yes	No
<div>1</div> <div>Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i></div>		

Section D. All Type III Supporting Organizations

	Yes	No
<div>1</div> <div>Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?</div>		
<div>2</div> <div>Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i></div>		
<div>3</div> <div>By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i></div>		

Section E. Type III Functionally-Integrated Supporting Organizations

	Yes	No
<div>1</div> <div>Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)</div> <div><div><div><input type="checkbox"/></div><div>The organization satisfied the Activities Test. Complete line 2 below.</div></div><div><div><input type="checkbox"/></div><div>The organization is the parent of each of its supported organizations. Complete line 3 below.</div></div><div><div><input type="checkbox"/></div><div>The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).</div></div></div>		
<div>2</div> <div>Activities Test. Answer (a) and (b) below.</div> <div><div><div><div>2a</div><div>Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i></div></div><div><div>2b</div><div>Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i></div></div></div></div>		
<div>3</div> <div>Parent of Supported Organizations. Answer (a) and (b) below.</div> <div><div><div><div>3a</div><div>Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i></div></div><div><div>3b</div><div>Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i></div></div></div></div>		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

☐

Section 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	

Section 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)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
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	

Section 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	Minimum asset amount for prior year (from Section B, line 8, Column A)	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-integrated Type III supporting organization (see instructions). <input type="checkbox"/>		

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported 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 is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013.			
e From 2014.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013.			
d From 2014.			
e From 2015.			

Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
TIGER WOODS FOUNDATION INC

Employer identification number
20-0677815

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

1

Total number at end of year

(a) Donor advised funds

(b) Funds and other accounts

2

Aggregate value of contributions to (during year)

3

Aggregate value of grants from (during year)

4

Aggregate value at end of year

5

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes

☐ No

6

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes

☐ No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1

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

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

a

Total number of conservation easements

b

Total acreage restricted by conservation easements

c

Number of conservation easements on a certified historic structure included in (a)

d

Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

Held at the End of the Year

2a

2b

2c

2d

3

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

4

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

5

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

☐ Yes

☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

▶

7

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

▶ \$

8

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

☐ Yes

☐ No

9

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a

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

b

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

(i) Revenue included on Form 990, Part VIII, line 1

▶ \$

(ii) Assets included in Form 990, Part X

▶ \$

2

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

a

Revenue included on Form 990, Part VIII, line 1

▶ \$

b

Assets included in Form 990, Part X

▶ \$

Part III

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

(continued)

3

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

a☐ Public exhibition

d☐ Loan or exchange programs

b☐ Scholarly research

e☐ Other

c☐ Preservation for future generations

4

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

5

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

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

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

1a

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

☐ Yes

☐ No

b

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

cBeginning balance

dAdditions during the year

eDistributions during the year

fEnding balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

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

☐

Part V

Endowment Funds.

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

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

2

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

aBoard designated or quasi-endowment

bPermanent endowment

cTemporarily restricted endowment

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

3a

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

(i) unrelated organizations

(ii) related organizations

3a(i)

3a(ii)

3b

Yes

No

b

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

4

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

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a)Cost or other basis (investment)	(b)Cost or other basis (other)	Accumulated (c)depreciation	(d)Book value
1a	Land			
b	Buildings	11,581,225	3,156,424	8,424,801
c	Leasehold improvements	2,731,865	1,880,483	851,382
d	Equipment	2,630,219	2,037,549	592,670
e	Other	379,631	379,631	
Total.	Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))			9,868,853

Part VII

Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) FUND - BLUE ORCHID	236,066	F
(B) FUND - GLOBAL EQUITY	15,107,112	F
(C) FUND - ALGONQUIN FUND	9,174,578	F
(D) FUND - TUDOR BVI	22,155	F
(E) FUND - AMMOF LTD	1,513,253	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	26,053,164	

Part VIII

Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
Federal income taxes	0
INTEREST RATE SWAP	2,353,425
DUE TO AFFILIATES	2,202,539
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	4,555,964

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

☒

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	12,807,190
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	3,794,359
b	Donated services and use of facilities	2b	35,392
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	-204,540
e	Add lines 2a through 2d	2e	3,625,211
3	Subtract line 2e from line 1	3	9,181,979
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c.(This must equal Form 990, Part I, line 12)	5	9,181,979

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	10,211,524
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	35,392
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	35,392
3	Subtract line 2e from line 1	3	10,176,132
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	10,176,132

Part XIII

Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 20-0677815
Name: TIGER WOODS FOUNDATION INC

Supplemental Information

Return Reference	Explanation
FIN 48 FOOTNOTE (ASC 740)	SCHEDULE D, PART X, LINE 2 THE FOUNDATION ADOPTED THE PROVISIONS OF ACCOUNTING STANDARDS C ODIFICATION (ASC) TOPIC 740, INCOME TAXES, WHICH PRESCRIBES A RECOGNITION THRESHOLD AND ME ASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX PROVI SION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN AND PROVIDES GUIDANCE ON DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, DISCLOSURE, AND TRANSITION MANAGEMENT ASSERTS TH AT NO SUCH UNCERTAINTY IN INCOME TAXES EXISTS REQUIRING ACCRUAL OR DISCLOSURE AT SEPTEMBER 30, 2016 OR 2015

Supplemental Information

Return Reference	Explanation
REVENUE INCLUDED ON AUDITED FINANCIAL STATEMENTS, NOT ON FORM 990	SCHEDULE D, PART XI, LINE 2D UNREALIZED LOSS ON INTEREST RATE SWAP NOT REPORTED ON FORM 990 -\$204,540

SCHEDULE E
(Form 990 or
990-EZ)

Department of the
Treasury
Internal Revenue
Service

Schools

▶Complete if the organization answered "Yes" on Form 990,
Part IV, line 13, or Form 990-EZ, Part VI, line 48.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public
Inspection

Name of the organization
TIGER WOODS FOUNDATION INC

Employer identification number

20-0677815

Part I

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1 Yes	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2 Yes	
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3 Yes	
4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II	4a Yes 4b Yes 4c Yes 4d Yes	
5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? b Admissions policies? c Employment of faculty or administrative staff? d Scholarships or other financial assistance? e Educational policies? f Use of facilities? g Athletic programs? h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5a 5b 5c 5d 5e 5f 5g 5h	No No No No No No No No
6a Does the organization receive any financial aid or assistance from a governmental agency?	6a	No
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II	6b	No
7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7 Yes	

Part II **Supplemental Information.**

Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information (see instructions).

Return Reference	Explanation
PUBLICIZING OF RACIALLY NONDISCRIMINATORY POLICY	Form Sch E Part I Line 3 THE TIGER WOODS FOUNDATION PUBLICIZED ITS RACIALLY NONDISCRIMINATORY POLICY IN ALL STUDENT APPLICATION FORMS AND ON THE ORGANIZATION'S WEBSITE

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

► Attach to Form 990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
TIGER WOODS FOUNDATION INC

Employer identification number
20-0677815

► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Part I

General Information on Activities Outside the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1

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

☐ Yes
☒ No

2

For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3

Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, descnbe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) East Asia and the Pacific			Grantmaking	N/A	34,517
(2)					
(3)					
(4)					
(5)					
3a Sub-total					34,517
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					34,517

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			East Asia and the Pacific	CHILDREN'S EDUCATION	0	N/A	34,517	COMPUTERS	RETAIL VALUE
(2)									
(3)									
(4)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ 1

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) American Funds Scholarship		1	1,000			N/A	N/A
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)*

☐

Yes

☒

No

Part V **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
ACCOUNTING METHOD FOR REPORTING EXPENDITURE	SCHEDULE F, PART I, LINE 3, COLUMN F EXPENDITURES IN COLUMN F ARE REPORTED ON THE ACCRUAL BASIS OF ACCOUNTING

990 Schedule F, Supplemental Information

Return Reference	Explanation
GRANTMAKING RECORDS	<p>SCHEDULE F, PART I, LINE 1&2 THE RACHABURI CONVENT SCHOOL, AN ALL-GIRLS ORPHANAGE ALSO SERVES AS A BOARDING SCHOOL SERVING 91+ GIRLS AGES 3-18, PROVIDES STUDENTS BASIC EDUCATION CLASSES AS WELL AS CLASSES IN LIFE SKILLS INCLUDING, SEWING, COOKING, COMPUTERS AND HEALTH THE FOUNDATION PROVIDED 40 COMPUTERS FOR THE CAMPUS TECHNOLOGY LAB ALL DESKTOPS ARE SHARED</p> <p>AMONGST TEACHERS AND STUDENTS, TO FURTHER DEVELOP THE GIRLS' EDUCATION, LEARN ENGLISH AND EXPAND TECHNOLOGY SKILLS THIS SUPPORT ALIGNS WITH THE FOUNDATION'S EDUCATIONAL COMMITMENT TO FURTHER THE MISSION OF YOUTH PROGRAMS AT THE TIGER WOODS FOUNDATION, WE SUPPORTED ASIAN COMMUNITIES INCLUDING CHINA, KOREA AND THAILAND PAST SUPPORT INCLUDES, GRANTS, CLOTHING, FOOD DONATIONS, REBUILDING FACILITIES, AND PROVIDING TECHNOLOGY OUR PARTNERSHIPS WITH HSBC AND NIKE WERE INSTRUMENTAL IN THOSE PAST EFFORTS</p>

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a
Attach to Form 990 or Form 990-EZ
Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
TIGER WOODS FOUNDATION INC

Employer identification number
20-0677815

Part I Fundraising Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☒ Mail solicitations

e ☒ Solicitation of non-government grants

b ☒ Internet and email solicitations

f ☐ Solicitation of government grants

c ☐ Phone solicitations

g ☒ Special fundraising events

d ☒ In-person solicitations

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 JENNIFER WATTS 3039 BANCROFT DRIVE SPRING VALLEY, CA 91977	GRANT WRITING		No		10,000	
2 ODELL SIMMS LYNCH INC 1593 SPRING HILL ROAD STE 150 TYSONS CORNER, VA 22182	FUNDRAISING CONSULTANT		No		135,692	
3 ELEVATE 2314 18TH ST NW 2ND FL WASHINGTON, DC 20009	GRANT WRITING		No		53,000	
4						
5						
6						
7						
8						
9						
10						
Total					198,692	

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AZ, AR, CA, CT, DE, DC, FL, GA, ID, IL, IN, IA, KS, KY, LA, MD, MA, MS, MT, NE, NV, NJ, NY, OH, OK, OR, PA, RI, SC, SD, TX, VA, WV

Part II Fundraising Events.

Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a)Event #1	(b)Event #2	(c)Other events	(d) Total events (add col (a) through col (c))	
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary: Add lines 4 through 9 in column (d) ▶				
	11	Net income summary: Subtract line 10 from line 3, column (d) ▶				

Part III Gaming.

Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a)Bingo	(b)Pull tabs/Instant bingo/progressive bingo	(c)Other gaming	(d) Total gaming (add col (a) through col (c))	
Revenue	1	Gross revenue				
	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
	7	Direct expense summary: Add lines 2 through 5 in column (d) ▶				
	8	Net gaming income summary: Subtract line 7 from line 1, column (d). ▶				

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

11

Does the organization conduct gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activity conducted in

a	The organization's facility	13a	%
b	An outside facility	13b	%

14

Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$

c

If "Yes," enter name and address of the third party

Name ▶

Address ▶

16

Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV

Supplemental Information.

Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
SCHEDULE G, PART I, LINE 2b, COLUMN (iv)	DURING 2016, THE FOUNDATION BEGAN THE UNEXPECTED CHAMPIONS FUNDS CAMPAIGN TO RAISE NEW FUNDS AND TO PROMOTE GROWTH BY 2020, THUS REQUIRING ADDITIONAL FUNDRAISING CONSULTANTS AND EXPLORATION

2015

Open to Public Inspection

20-0677815

☒ Yes ☐ No

(h) Purpose of grant or assistance

Schedule I (Form 990) 2015

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) EARL WOODS SCHOLARSHIPS	27	95,432		N/A	N/A
(2) EARL WOODS INTERNSHIPS	2	1,950		N/A	N/A

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
GRANT MONITORING PROCEDURES	FORM 990, SCHEDULE I, PART I, LINE 2 DUE TO THE SIZE OF GRANTS MADE TO UNRELATED CHARITABLE ORGANIZATIONS, GENERALLY UNDER \$25,000, THE FOUNDATION RELIES ON PRE-GRANT PROCEDURES AND INQUIRIES TO ENSURE THE GRANTEE ORGANIZATION MEETS THE REQUIREMENTS FOR APPROVED PROGRAMMATIC AREAS OF FUNDING

Additional Data

Software ID:
Software Version:
EIN: 20-0677815
Name: TIGER WOODS FOUNDATION INC

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Boston College Financial Aid Processing Center PO Chestnut Hill, MA 02467	04-2103545	501(C)(3)	8,540		N/A	N/A	COMMUNITY SUPPORT
Boston Red Sox Foundation 4 Yawkey Way Boston, MA 02215	33-1007984	501(C)(3)	75,000		N/A	N/A	YOUTH DEVELOPMENT
Boston University Financial Assistance 881 Commonweal Boston, MA 02215	04-2103547	501(C)(3)	7,960		N/A	N/A	COMMUNITY SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
College of the Holy Cross Office of Financial Aid Hogan Campu Room 314 1 College Street Worcester, MA 016102395	04-2103558	501(C)(3)	8,000		N/A	N/A	COMMUNITY SUPPORT
Connelly School of the Holy Child 9029 Bradley Blvd Potomac, MD 20854	52-0743609	501(C)(3)	23,600		N/A	N/A	COMMUNITY SUPPORT
Envision Excellence in STEM Education 2108 Lamberton Road Cleveland, OH 44118	20-8622102	501(C)(3)	20,000		N/A	N/A	COMMUNITY SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hockomock Area YMCA 300 Elmwood Street North Attleborro, MA 02760	04-2131749	501(C)(3)	25,000		N/A	N/A	YOUTH DEVELOPMENT
Ithaca College 953 Danby RD Peggy Ryan Williams Ce Ithaca, NY 14850	15-0532204	501(C)(3)	10,000		N/A	N/A	COMMUNITY SUPPORT
Kids on the Hill Bridgers Wealth Management 110 Mart Moorestown, NJ 08057	31-1784865	501(C)(3)	6,500		N/A	N/A	YOUTH DEVELOPMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Massachusetts Golf Association Inc 300 Arnold Palmer Blvd Norton, MA 02766	04-2487562	501(C)(3)	15,000		N/A	N/A	COMMUNITY SUPPORT
St Andrew Romanian Church 9111 River Road Pontomac, MD 20854	26-4570443	501(C)(6)	7,000		N/A	N/A	COMMUNITY SUPPORT
Tavistock Foundation 9350 Conroy Windermere Rd Windermere, FL 34786	59-3249459	501(C)(3)	220,000		N/A	N/A	COMMUNITY SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Club Foundation 8500 River Road Bethesda, MD 20817	52-1642692	501(C)(3)	10,000		N/A	N/A	COMMUNITY SUPPORT
The First Tee 425 South Legacy Trail St Augustine, FL 32092	59-3577327	501(C)(3)	142,858		N/A	N/A	COMMUNITY SUPPORT
The Francis Ouimet Scholarship Fund 300 Arnold Palmer Blvd Norton, MA 02766	04-2234126	501(C)(3)	7,500		N/A	N/A	YOUTH DEVELOPMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Shepherd Foundation PO Box 50 Kensington, MD 20895	52-1613402	501(C)(3)	10,000		N/A	N/A	COMMUNITY SUPPORT
Town of Norton 70 East Main Street Norton, MA 02766	04-6001252	TOWN OF NORTON	25,000		N/A	N/A	COMMUNITY SUPPORT
University of California Irvine FDN SAGE Scholars Program 120 Theory S Irvine, CA 92617	95-2540117	UNIV OF CA	25,000		N/A	N/A	SAGE SCHOLARS FUND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
United Service Organization 2111 Wilson Blvd Arlington, VA 22201	13-1610451	501(C)(3)	28,000		N/A	N/A	COMMUNITY SUPPORT
University of Rochester Bursars Office PO Box 270037 330 M Rochester, NY 146270037	16-0743209	501(C)(3)	10,000		N/A	N/A	COMMUNITY SUPPORT
US Challenge Cup 21 Agnes Street East Providence, RI 02914	22-3019734	501(C)(3)	10,000		N/A	N/A	YOUTH RECREATION SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
World Golf Foundation Inc One World Golf Place St Augustine, FL 32092	59-2998925	501(C)(3)	100,000		N/A	N/A	COMMUNITY SUPPORT
YMCA of Attleboro 63 North Main Street Attleboro, MA 02703	04-2255819	501(C)(3)	10,000		N/A	N/A	YOUTH DEVELOPMENT

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
TIGER WOODS FOUNDATION INC

Employer identification number
20-0677815

Part I Questions Regarding Compensation			Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items				
<input checked="" type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use			
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence			
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees			
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)			
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain			1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?			2	Yes
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract			
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study			
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee			
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization				
a Receive a severance payment or change-of-control payment?			4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?			4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?			4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III				
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of				
a The organization?			5a	No
b Any related organization?			5b	No
If "Yes," on line 5a or 5b, describe in Part III				
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of				
a The organization?			6a	No
b Any related organization?			6b	No
If "Yes," on line 6a or 6b, describe in Part III				
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III			7	No
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III			8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?			9	

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 RICK SINGER PRES/SEC/CEO	(i)	145,350 -----	0 -----	0 -----	0 -----	0 -----	145,350 -----	0 -----
	(ii)	337,950	0	0	10,600	43,283	391,833	0
2 JIN THATCHER VP OPERATIONS & ADMINISTRATION	(i)	169,499 -----	30,000 -----	7,906 -----	6,780 -----	27,939 -----	242,124 -----	0 -----
	(ii)	0	0	0	0	0	0	0
3 KATHERINE BIHR VP PROGRAMS & EDUCATION	(i)	158,521 -----	25,000 -----	9,095 -----	6,341 -----	8,871 -----	207,828 -----	0 -----
	(ii)	0	0	0	0	0	0	0
4 MICHELLE S KIM VP STRATEGIC PARTNERSHIPS	(i)	153,927 -----	25,000 -----	8,280 -----	6,157 -----	3,785 -----	197,149 -----	0 -----
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

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

Return Reference	Explanation
Compensation from Related Organizations	THE PRESIDENT, SECRETARY AND CEO, RICK SINGER, WAS COMPENSATED THROUGH TIGER WOODS FOUNDATION, INC , AND A RELATED 501(C)(3) ORGANIZATION, TIGER WOODS CHARITY EVENT CORPORATION, WHERE HE DEVOTED A COMBINED TOTAL OF 65 HOURS PER WEEK. IN CONJUNCTION WITH HIS DUTIES AS PRESIDENT AND CEO OF THE TIGER WOODS FOUNDATION, HE OVERSAW ALL FIVE TIGER WOODS LEARNING CENTERS AND ALL THE NATIONAL SCHOLARSHIP PROGRAMS.
FIRST CLASS TRAVEL	SCHEDULE J, PART I, LINES 1A AND 2 THE FOUNDATION PERMITS THE PRESIDENT/CEO TO FLY FIRST CLASS IN LIMITED CIRCUMSTANCES WHERE THERE IS A BONA FIDE BUSINESS PURPOSE. THERE IS NO FORMAL WRITTEN POLICY, HOWEVER, APPROVALS ARE GRANTED BY THE EXECUTIVE COMMITTEE BASED ON THE FACTS AND CIRCUMSTANCES. THE EXPENSE PAID FOR FORMER PRESIDENT/CEO WAS TREATED AS A NON-TAXABLE BENEFIT.

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As Filed Data -

DLN: 93493227035857

Schedule K
(Form 990)

Supplemental Information on Tax Exempt Bonds

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury

Internal Revenue Service

Name of the organization

TIGER WOODS FOUNDATION INC

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

Attach to Form 990.

Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

20-0677815

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

Part II		Proceeds							
		A		B		C		D	
1	Amount of bonds retired	1,124,501							
2	Amount of bonds legally defeased	0							
3	Total proceeds of issue	10,775,000							
4	Gross proceeds in reserve funds	0							
5	Capitalized interest from proceeds	0							
6	Proceeds in refunding escrows	0							
7	Issuance costs from proceeds	0							
8	Credit enhancement from proceeds	0							
9	Working capital expenditures from proceeds	0							
10	Capital expenditures from proceeds	0							
11	Other spent proceeds	10,775,000							
12	Other unspent proceeds	0							
13	Year of substantial completion	2013							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?	X							
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?								

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

Part III Private Business Use (Continued)

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

Part IV Arbitrage

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

Part IV **Arbitrage** *(Continued)*

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

Part V **Procedures To Undertake Corrective Action**

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

Part VI **Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions).

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

SCHEDULE O (Form 990 or 990-EZ)

Department of the
Treasury
Internal Revenue
Service

Supplemental Information to Form 990 or 990-EZ

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

2015

Open to Public
Inspection

Name of the organization
TIGER WOODS FOUNDATION INC

Employer identification number

20-0677815

990 Schedule O, Supplemental Information

Return Reference	Explanation
ORGANIZATION'S MISSION CONTINUED	FORM 990, PART III, LINE 1 THE TIGER WOODS FOUNDATION ("TWF") HAS A SIMPLE, UNIVERSAL VISION TO HELP STUDENTS IN NEED THRIVE IN SCHOOL, THEIR COMMUNITIES AND THE WORKING WORLD. DESIGNED TO EQUIP STUDENTS WITH THE ABILITY TO EXCEED ANY AND ALL EXPECTATIONS, TWF'S COLLEGE-ACCESS PROGRAMS REACH UNDERSERVED YOUTH IN ALL STAGES OF ACADEMIC LIFE. THE GROUNDBREAKING TIGER WOODS LEARNING CENTER ("TWLC") IN ORANGE COUNTY, CA, WASHINGTON, D C, PHILADELPHIA, PA, QUANTICO, VA AND STUART, FL, AND THE EARL WOODS SCHOLARSHIP PROGRAM PROVIDES A WEALTH OF EDUCATIONAL OPPORTUNITIES TO YOUNG PEOPLE NATIONWIDE. TWLC'S OPERATE SCHOOL FACILITIES THAT MAINTAIN REGULAR FACULTY, CURRICULUM, AND HAVE A REGULARLY ENROLLED STUDENT BODY OF STUDENTS IN ATTENDANCE, WITHIN THE MEANING OF SECTION 170(B)(1)(A)(II) OF THE CODE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
PROGRAM SERVICE ACTIVITIES	<p>FORM 990, PART III, LINE 4A, CONTINUED IN 2016, TWLF ALSO EMBARKED ITS EXPANSION PLAN TO DEVELOP NATIONWIDE ACCESS WITH DIGITAL PROGRAMS THE ONLINE PROGRAM(S) RECREATES THE LEARNING CENTER EXPERIENCE AND CURRICULUM ONTO DYNAMIC DIGITAL PLATFORM MILLIONS OF STUDENTS WILL BE INTRODUCED TO OPTIONS FOR COLLEGE AND CAREERS IN STEM BUILDING ON THESE TENETS, THE TIGER WOODS LEARNING CENTER HAS INTEGRATED RESEARCH ON WHAT YOUNG PEOPLE NEED TO BECOME HEALTHY AND THRIVING ADULTS THE FOUNDATION HAS NEARLY SERVED 150,000 STUDENTS THROUGH ITS LEARNING CENTER PROGRAMS CURRICULUM OFFERED - SCHOOL DAY PROGRAM ELEMENTARY SCHOOL - WEEK-LONG STUDENT/TEACHER ENRICHMENT DURING SCHOOL DAY STUDENT CURRICULUM FOCUSED ON FORENSIC SCIENCE/MARINE SCIENCE TEACHER PROFESSIONAL DEVELOPMENT - STANDARDS-BASED SCIENCE, AND TECHNOLOGY INTEGRATION - AFTER SCHOOL PROGRAM MIDDLE/HIGH SCHOOL AFTER-SCHOOL ENRICHMENT OVER 50 STEM FOCUSED MODULES EXAMPLES INCLUDE BIOTECHNOLOGY, ENGINEERING, ROBOTICS, VIDEO PRODUCTION, VIDEO GAME DESIGN, NUTRITION/FITNESS, ENTREPRENEURSHIP AND AEROSPACE TWLC -EXPANSION IN 2008, THE TIGER WOODS FOUNDATION LAUNCHED ITS FIRST EXPANSION TWLC CAMPUS IN WASHINGTON, DC IN PARTNERSHIP WITH A LOCAL CHARTER SCHOOL TWO ADDITIONAL CAMPUSES WERE ADDED IN PHILADELPHIA, PA AND STUART, FL THE FOLLOWING YEAR TO PROVIDE YOUTH WITH AUTHENTIC LEARNING EXPERIENCES IN ONE OR MORE TWLC SIGNATURE PROGRAMS FOCUSED ON SCIENCE, TECHNOLOGY, ENGINEERING AND MATH (STEM) CAREER EXPLORATION AND COLLEGE PREPARATION A SECOND CAMPUS WAS OPENED IN PHILADELPHIA, PA IN 2013 AT THE CRISTO REY PHILADELPHIA HIGH SCHOOL A CAMPUS WAS ALSO DEVELOPED IN COOPERATION WITH MARINE CORPS COMMUNITY SERVICES AT MCB-QUANTICO IN 2014, TWLF PROVIDED LIMITED PROGRAM SUPPORT A ROBOTICS PROGRAM AT ACHIEVEMENT FIRST, UNIVERSITY PREP HIGH SCHOOL IN NEW YORK, NY TWLC CAMPUS STUDENTS HAVE ACCESS TO STATE-OF-THE-ART TECHNOLOGY AND LEARN HOW TO USE TOOLS VITAL TO WORKPLACE PRODUCTIVITY IN THE 21ST CENTURY ALL EXPANSION LOCATIONS ARE SUPPORTED WITH ONGOING TRAINING, CURRICULUM MATERIALS, RESOURCE SUPPORT AND FUNDING CAMPUS MODEL 1 - WASHINGTON, DC - CESAR CHAVEZ CHARTER SCHOOL TWLC MAINTAINS TWO DC LOCATIONS IN PARTNERSHIP WITH THE CESAR CHAVEZ PUBLIC CHARTER SCHOOL FOR PUBLIC POLICY PATTERNED AFTER THE TWLC FLAGSHIP, THE CAMPUS MODEL 1 IS PROVIDED DEDICATED SPACE AT TWO CHAVEZ SCHOOLS, ONE ON CAPITOL HILL (GRADES 9-12) AND THE OTHER IN THE KENILWORTH NEIGHBORHOOD (GRADES 6-8 AND 9-12) TWLF STAFF SERVES OVER 1,000 STUDENTS ANNUALLY IN ONSITE AND OUTREACH PROGRAMS WHERE STUDENTS CAN EARN HIGH SCHOOL CREDIT CURRICULUM OFFERED - CAPITOL HILL HIGH SCHOOL STUDENTS - AFTER SCHOOL ENRICHMENT COMMUNICATIONS, VIDEO GAME DESIGN, COLLEGE ACCESS, AND FILMMAKING, SCHOOL DAY ELECTIVE COURSE ROBOTICS AND VIDEO JOURNALISM - PARKSIDE MIDDLE SCHOOL STUDENTS - AFTER SCHOOL ENRICHMENT GOING GREEN IN SCIENCE AND ENGINEERING, FIRST LEGO LEAGUE ROBOTICS CLUB, GRAPHIC DESIGN, VIDEO GAME DESIGN - SCHOOL DAY ELECTIVE</p>

Return Reference	Explanation
PROGRAM SERVICE ACTIVITIES	<p>E COURSE HIGH SCHOOL ROBOTICS - STEM CAREER CONFERENCE - SATURDAY HANDS-ON WORKSHOP FOR MIDDLE/HIGH SCHOOL STUDENTS FROM THE DC METRO AREA SPECIFIC FOCUS ON CAREER EXPLORATION FOR STUDENTS AND COLLEGE PREPARATION FOR FAMILIES - SUMMER DAY CLASSES OPEN TO STUDENTS THROUGHOUT DC METRO AREA - ONE-WEEK CONTENT INTENSIVE WORKSHOPS EXAMPLES INCLUDE TWLC CURRICULUM IN FORENSIC SCIENCE, INTRO TO COMPUTER PROGRAMMING, ASTRONOMY, VIDEO GAME DESIGN, COMMUNICATIONS, ROCKETRY AND VIDEO PRODUCTION CAMPUS MODEL 2 - PHILADELPHIA, PA, STUART, FL A SECOND EXPANSION MODEL INVOLVES TWLF PROVIDING FUNDING AND PROGRAM RESOURCES TO LOCAL SCHOOLS AND/OR COMMUNITY BASED ORGANIZATIONS ASSISTING WITH THE SET-UP OF A TWLC-BRANDED ENVIRONMENT WITHIN ONE CLASSROOM OR DESIGNATED SPACE FUNDING COVERS CURRICULUM, FACILITY INFRASTRUCTURE AND SUPPORTS A DEDICATED PROFESSIONAL DEVELOPMENT AND EVALUATION PROGRAM, WHICH INCLUDES SPECIALIZED TRAINING AT THE FLAGSHIP FACILITY IN ANAHEIM KEY COMPONENTS TO IDENTIFYING AN ACADEMIC PARTNER INCLUDE RESEARCH ON LOCAL DEMOGRAPHICS, SCHOOL PERFORMANCE ON STATE/NATIONAL ASSESSMENTS, AND A SHARED COMMITMENT TO DEVELOPING A COLLABORATIVE RELATIONSHIP WHERE BOTH TWLF AND THE LOCAL ENTITY CAN LEARN AND GROW TOGETHER IN THIS MODEL SITE-BASED STAFF ADMINISTERS THE PROGRAM WHILE TWLF PROGRAM STAFF PROVIDES BOTH CONSULTATION AND EXTERNAL SUPPORT TO ENSURE FIDELITY OF IMPLEMENTATION STUART, FL - MURRAY MIDDLE SCHOOL OFFERED AS AN AFTER-SCHOOL PROGRAM, TEACHERS AT MURRAY MIDDLE SCHOOL HAVE DELIVERED TWLF FORENSIC SCIENCE, UNIVERSAL SCIENCE AND VIDEO GAME DESIGN TO THEIR STUDENTS IN ADDITION, SCHOOL STAFF HAS BEEN TRAINED IN POSITIVE YOUTH DEVELOPMENT METHODS AND HAVE INTEGRATED ACTIVITIES INTO THEIR ADVISORY CLASSES AT ALL GRADE LEVELS PHILADELPHIA, PA - KIPP - DUBOIS COLLEGIATE PREPARATORY ACADEMY OFFERS THEIR HIGH SCHOOL STUDENTS THE OPPORTUNITY TO DO HANDS-ON ACTIVITIES LIKE DISSECTION, VIDEO GAME DESIGN, BIOTECHNOLOGY, ENGINEERING AND CRIME SCENE INVESTIGATION DELIVERED AS A FOR-CREDIT CLASS, STUDENTS PARTICIPATE IN A SATURDAY ENRICHMENT WORKSHOP WHERE THEY ARE ABLE TO SPEND MORE TIME EXPLORING SCIENTIFIC CONCEPTS PHILADELPHIA, PA - CRISTO REY PHILADELPHIA HIGH SCHOOL THROUGH A PARTNERSHIP WITH USLI AND CRISTO REY PHILADELPHIA, THE TWLC CAMPUS AT CRISTO REY OFFERS UNIQUE STEM (SCIENCE, TECHNOLOGY, ENGINEERING, MATH) PROGRAMMING COURSES INCLUDE TETRIS ROBOTICS, WHERE STUDENTS USE THEIR CREATIVITY TO BUILD ROBOTS WHILE EXPLORING THE WORLD OF ENGINEERING, AND UNIVERSAL SCIENCE, WHICH FOCUSES ON CHEMISTRY AND BIOLOGY ADDITIONALLY THE TWLC CAMPUS PROVIDES MENTORING AND TEACHER-DEVELOPMENT TRAINING QUANTICO, VA - QUANTICO MIDDLE-HIGH SCHOOL THROUGH A PARTNERSHIP WITH MARINE CORPS COMMUNITY SERVICES, THE TWLC CAMPUS AT MCB-QUANTICO OFFERS FORENSIC SCIENCE TO MIDDLE SCHOOL STUDENTS ATTENDING QUANTICO MIDDLE HIGH SCHOOL ADDITIONALLY, THE TWLC CAMPUS PROVIDES MENTORING, TEACHER DEVELOPMENT, AND COLLEGE ACCESS TRAINING FOR STUDENTS AND PARENTS N</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
PROGRAM SERVICE ACTIVITIES	<p>EW YORK, NY - ACHIEVEMENT FIRST, UNIVERSITY PREP HIGH SCHOOL THROUGH A PARTNERSHIP WITH ACHIEVEMENT FIRST SCHOOLS, THE TWLF PROVIDES EQUIPMENT, INSTRUCTOR TRAINING AND SUPPORT FOR A ROBOTICS TEAM AT UNIVERSITY PREP HIGH SCHOOL SUMMER CLASSES AND OUTREACH SIX ONE-WEEK CLASSES AT THE TWLC-OC AND TWLC-DC ELEMENTARY /MIDDLE/HIGH SCHOOL, SUMMER ACADEMY RESIDENTIAL PROGRAM FOCUSED ON STEM AND GOLF FOR CHILDREN FROM MILITARY FAMILIES, COLLEGE BOUND ACADEMY GOLF OUTREACH TWLC-OC HOSTS WEEKLY CLINICS EACH SATURDAY AT THE TWLC GOLF FACILITY THE MOBILE GOLF PROGRAM TAKES THE TWLC GOLF PROGRAM ON THE ROAD TO LOCAL ELEMENTARY SCHOOLS OFFERED TO ORANGE COUNTY STUDENTS IN GRADES 5-6, THIS THREE-PHASE PROGRAM EMPHASIZES THE FUNDAMENTALS OF PUTTING, PITCHING AND THE FULL SWING BOUND ACADEMY GOLF OUTREACH TWLC-OC HOSTS WEEKLY CLINICS EACH SATURDAY AT THE TWLC GOLF FACILITY THE MOBILE GOLF PROGRAM TAKES THE TWLC GOLF PROGRAM ON THE ROAD TO LOCAL ELEMENTARY SCHOOLS OFFERED TO ORANGE COUNTY STUDENTS IN GRADES 5-6, THIS THREE-PHASE PROGRAM EMPHASIZES THE FUNDAMENTALS OF PUTTING, PITCHING AND THE FULL SWING</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4C, CONTINUED	<p>TO QUALIFY , STUDENTS MUST DEMONSTRATE OUTSTANDING ACADEMIC ACHIEVEMENT, FINANCIAL NEED AND A COMMITMENT TO COMMUNITY THE EARL WOODS SCHOLAR PROGRAM CONTINUES TO BE SUCCESSFUL MEASURING 98% GRADUATION RATE IN 2016 FUNDING TUITION IS JUST ONE OF THE MANY HURDLES FACING FIRST-GENERATION COLLEGE STUDENTS MANY ARE LEAVING HOME FOR THE FIRST TIME, ATTEMPTING TO JUGGLE WORK AND CLASS WHILE SCRAPING TOGETHER ENOUGH MONEY FOR BOOKS AND OTHER SUPPLIES MORE THAN 91% OF OUR SCHOLARS ARE FIRST-GENERATION COLLEGE STUDENTS, NAVIGATING THROUGH COLLEGE ON THEIR OWN EWS IS AN INCREDIBLE SUPPORT NETWORK THAT INCLUDES ADMISSIONS COUNSELING, DEDICATED MENTORS, SPECIALIZED INTERNSHIPS, FINANCIAL ASSISTANCE, PROFESSIONAL WORKSHOPS, AND CAREER DEVELOPMENT SERVICES FOR EACH SCHOLAR ACCEPTED INTO THE PROGRAM WORKSHOPS INCLUDE RESUME-WRITING, MOCK INTERVIEWS, INFORMATION ABOUT GRADUATE SCHOOL AND BEGINNING THE CAREER SEARCH IT IS IMPORTANT TO UNDERSCORE THAT SCHOLARS RECEIVE TWOFINANCIAL ASSISTANCE FOR TUITION, BOOKS, AND TRAVEL HOME AS WELL AS FOR TWOF WORKSHOPS AND WINTER CLOTHING ANOTHER ASPECT OF THE EWS ARE PRE-COLLEGE WORKSHOPS DESIGNED TO GET YOUNG PEOPLE TO UNDERSTAND THAT IT IS NOT TOO EARLY TO START THINKING ABOUT COLLEGE AND THE BENEFITS OF A COLLEGE EDUCATION THE WORKSHOPS ARE DESIGNED TO HELP STUDENTS FINISH HIGH SCHOOL PREPARED FOR POSTSECONDARY EDUCATION AND WITH A CLEAR IDEA ON HOW TO BEST APPROACH THE APPLICATION PROCESS AND SECURE FINANCIAL AID THE PROGRAM ALSO ENGAGES PARENTS WITH INFORMATION REGARDING THE PROCESS THEIR STUDENTS ARE GOING THROUGH DURING MIDDLE AND HIGH SCHOOL, AND HOW TO BE ADVOCATES FOR THEIR STUDENTS' EDUCATIONAL SUCCESS THIS COLLEGE ACCESS PROGRAM IS OFFERED FOR FREE TO STUDENTS AND THEIR FAMILIES WHO ARE INTERESTED IN HIGHER EDUCATION AND HELPS INFORM THEM OF ITS IMPORTANCE AND AFFORDABILITY</p>

990 Schedule O, Supplemental Information

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

990 Schedule O, Supplemental Information

Return Reference	Explanation
PROCESS FOR REVIEW OF FORM 990	FORM 990, PART VI, LINE 11 THE BOARD OF GOVERNORS HAS DELEGATED THE REVIEW OF THE FORM 990 TO THE AUDIT COMMITTEE. THE ORGANIZATION'S EXECUTIVE STAFF WORKS CLOSELY WITH THE OUTSIDE ACCOUNTING FIRM IT ENGAGES TO REVIEW THE RETURN, AND THE FINAL DRAFT OF FORM 990 IS ALSO REVIEWED BY THE TREASURER/CFO PRIOR TO PROVIDING THE DRAFT TO THE AUDIT COMMITTEE. IN ADDITION TO CONSULTING WITH THE TREASURER/CFO AND EXECUTIVE STAFF, THE AUDIT COMMITTEE ALSO MEETS WITH THE ACCOUNTING FIRM HIRED TO PREPARE THE FORM 990. SUBSEQUENT TO ITS REVIEW, THE AUDIT COMMITTEE REPORTS BACK TO THE BOARD REGARDING ITS OVERSIGHT OF THE FORM 990 AND THE FINAL DRAFT IS PROVIDED TO THE ENTIRE BOARD BEFORE THE RETURN IS FILED. ITS OVERSIGHT OF THE FORM 990 AND THE FINAL DRAFT IS PROVIDED TO THE ENTIRE BOARD BEFORE THE RETURN IS FILED.

990 Schedule O, Supplemental Information

Return Reference	Explanation
CONFLICT OF INTEREST POLICY	<p>FORM 990, PART VI, LINE 12C PURSUANT TO THE CONFLICT OF INTEREST POLICY, AN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE, AIMED AT DETERMINING ANY FAMILY AND BUSINESS RELATIONSHIP TRANSACTIONS OR OTHER TRANSACTIONS THAT MAY POSE A POTENTIAL CONFLICT, IS DISTRIBUTED TO ALL COVERED PERSONS (I E, BOARD MEMBERS, OFFICERS AND EXECUTIVE LEADERSHIP OR KEY EMPLOYEES) COVERED PERSONS ARE REQUIRED TO DISCLOSE REAL OR POTENTIAL CONFLICTS AT THE TIME WHEN SUCH CONFLICTS ARISE WHEN SOMEONE BECOMES A COVERED PERSON AND ANNUALLY THEREAFTER, EACH COVERED PERSON IS REQUIRED TO SIGN A STATEMENT AFFIRMING THAT HE/SHE (1) HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, (2) HAS READ THE POLICY AND UNDERSTANDS SAID POLICY, AND (3) AGREES TO COMPLY WITH ALL REQUIREMENTS OF THE POLICY, INCLUDING COMPLETING THE CONFLICT OF INTEREST QUESTIONNAIRE THE PROCEDURES FOR ADDRESSING ANY CONFLICT OF INTEREST INCLUDES, BUT IS NOT LIMITED TO, THE FOLLOWING (1) THE CONFLICTING INTEREST IS FULLY DISCLOSED TO THE BOARD, (2) THE INTERESTED PERSON RESPONDS TO FACTUAL QUESTIONS RELATED TO THE SUBSTANCE OF THE TRANSACTION OR ARRANGEMENT BEING CONSIDERED, AFTER WHICH HE/SHE SHALL LEAVE THE MEETING, (3) THE PERSON WITH THE CONFLICT OF INTEREST IS EXCLUDED FROM THE DISCUSSION AND APPROVAL OF SUCH TRANSACTION, (4) ALTERNATIVES TO THE PROPOSED TRANSACTION ARE INVESTIGATED, COMPETITIVE BIDS OR COMPARABLE VALUATIONS ARE OBTAINED, (5) ANY CONFLICTING ISSUES DURING THE COURSE OF A BOARD MEETING THAT CANNOT BE RESOLVED IS REFERRED TO THE GOVERNANCE COMMITTEE, AND (6) THE TRANSACTION OR ACTION MUST BE APPROVED BY A MAJORITY OF DISINTERESTED PERSONS</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
OFFICER COMPENSATION DETERMINATION	<p>FORM 990, PART VI, LINE 15a THE BOARD APPOINTS A COMPENSATION COMMITTEE, NONE OF WHICH HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT, TO BE ACCOUNTABLE FOR SETTING REASONABLE COMPENSATION PACKAGES FOR THE CEO THE COMPENSATION COMMITTEE DEVELOPS, CONSISTENT WITH THE ORGANIZATION'S PHILOSOPHY AND PRINCIPLES THE ANNUAL PERFORMANCE GOALS AND CRITERIA TO BE USED IN DETERMINING MERIT INCREASES AND VARIABLE COMPENSATION CRITERIA FOR OFFICERS AND KEY EMPLOYEES THE COMPENSATION COMMITTEE ALSO HIRES A QUALIFIED INDEPENDENT COMPENSATION AND BENEFITS SPECIALIST (INDEPENDENT EXPERT) TO REVIEW, ANALYZE AND PROVIDE BENCHMARKING DATA FOR THE TOTAL COMPENSATION AND BENEFITS PACKAGE APPROPRIATE COMPARABILITY DATA IS OBTAINED FROM AN INDEPENDENT EXPERT (I E, TOTAL ECONOMIC BENEFITS PAID BY SIMILARLY SITUATED ORGANIZATIONS, BOTH TAXABLE AND TAX-EXEMPT) FOR SIMILAR JOB RESPONSIBILITIES THE COMPENSATION COMMITTEE APPROVES THE COMPENSATION ANNUALLY INCENTIVE COMPENSATION IS DETERMINED BY THE COMPENSATION COMMITTEE AT THE END OF THE CALENDAR YEAR BASED ON THE EMPLOYEE'S PERFORMANCE AGAINST STATED GOALS FOR THAT YEAR. THE COMMITTEE'S WRITTEN RECORDS INCLUDE THE (1) TERMS OF THE ARRANGEMENT WITH THE DISQUALIFIED PERSON (INCLUDING THE DATE THE ARRANGEMENT WAS APPROVED), AND (2) A DESCRIPTION OF THE COMPARABLE DATA RELIED ON BY THE COMMITTEE KEY DELIBERATIONS OF THE COMMITTEE, INCLUDING (A) THE TERMS OF THE TRANSACTION THAT WAS APPROVED AND THE DATE IT WAS APPROVED, (B) THE MEMBERS OF THE AUTHORIZED BODY WHO WERE PRESENT DURING DEBATE ON THE TRANSACTION THAT WAS APPROVED AND THOSE WHO VOTED ON IT, (C) THE COMPARABILITY DATA OBTAINED AND RELIED UPON BY THE AUTHORIZED BODY AND HOW THE DATA WAS OBTAINED, AND (D) ANY ACTIONS TAKEN WITH RESPECT TO CONSIDERATION OF THE TRANSACTION BY ANY ONE WHO IS OTHERWISE A MEMBER OF THE AUTHORIZED BODY BUT WHO HAD A CONFLICT OF INTEREST WITH RESPECT TO THE TRANSACTION ARE ALSO DOCUMENTED IN MINUTES WHICH ARE APPROVED AT THE NEXT COMMITTEE MEETING</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
OTHER OFFICER COMPENSATION DETERMINATION POLICY	FORM 990, PART VI, LINE 15B THE FOUNDATION FOLLOWS THE SAME PROCESS FOR DETERMINING COMPENSATION PACKAGES FOR OTHER OFFICERS AND KEY EMPLOYEES AS IT DOES FOR THE CEO

990 Schedule O, Supplemental Information

Return Reference	Explanation
DOCUMENTS AVAILABLE TO THE PUBLIC	FORM 990, PART VI, LINE 19 WHILE FEDERAL TAX LAWS DO NOT MANDATE THAT THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS BE MADE AVAILABLE FOR PUBLIC INSPECTION, THE ORGANIZATION MAKES ITS AUDITED FINANCIAL STATEMENTS THAT WERE PREPARED IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES (GAAP) AVAILABLE UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
RECONCILIATION OF NET ASSETS	FORM 990, PART XI, LINE 9 UNREALIZED LOSS ON INTEREST RATE SWAP (204,540)

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization TIGER WOODS FOUNDATION INC	Employer identification number 20-0677815
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Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) TIGER WOODS LEARNINGS CENTER DC CAMPUSES 121 INNOVATION DR SUITE 150 IRVINE, CA 92617 45-3467705	EDUCATION	DC	132,983	5,404,565	TWF

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)TIGER WOODS CHARITY EVENT CORPORATION 121 INNOVATION DR SUITE 150 IRVINE, CA 92617 06-1554474	FUNDRAISING	CA	501(C)(3)	11	TWF	Yes	

Part III

Identification of Related Organizations Taxable as a Partnership

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

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

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

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

Part V

Transactions With Related Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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

1

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

a

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

1a

No

b

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

1b

No

c

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

1c

Yes

d

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

1d

No

e

Loans or loan guarantees by related organization(s)

1e

No

f

Dividends from related organization(s)

1f

No

g

Sale of assets to related organization(s)

1g

No

h

Purchase of assets from related organization(s)

1h

No

i

Exchange of assets with related organization(s)

1i

No

j

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

1j

No

k

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

1k

No

l

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

1l

No

m

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

1m

No

n

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

1n

Yes

o

Sharing of paid employees with related organization(s)

1o

Yes

p

Reimbursement paid to related organization(s) for expenses

1p

Yes

q

Reimbursement paid by related organization(s) for expenses

1q

Yes

r

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

1r

No

s

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

1s

No

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)TIGER WOODS CHARITY EVENT CORPORATION	c	1,517,600	SEE PART VII

Schedule R (Form 990) 2015

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

[illegible]

Part VII

Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
METHOD OF DETERMINING AMOUNT INVOLVED	Form Sch R Part V Line 2 GRANT RECEIVED (C) THE CASH GRANTS FROM THE TIGER WOODS CHARITY EVENT CORPORATION WERE DETERMINED BASED ON THE RECIPIENT CHARITABLE ORGANIZATION'S OPERATIONAL NEEDS AND WAS APPROVED BY THE FOUNDATION'S BOARD DURING THE ANNUAL BUDGETING PROCESS FOR 2016-2017