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Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2009

OMB No 1545-0047

Open to Public

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

Inspectio

A Forthe	2009 calendar y		-01-2009 and ending 12-31-200	9	D Employer ide	ntification number	
Check if a	Ficase	C Name of organization Ladies Professional Golf Associ	ation				
Address ch	label or				75-005546! E Telephone nu		
Name cha	nge print o type. S e	·					
Initial retu		Number and street (or P O b	ox if mail is not delivered to street addre	ess) Room/suite	(386) 274-6 G Gross receipts \$		
Terminate		100 International Golf Drive			G Gloss lecelpts 3	63,912,000	
Amended	return	City or town, state or country Daytona Beach, FL 3212410					
Application	n pending	Daytona beach, TE 3212410	92 				
	F	lame and address of principal	officer	H(a) Is th	■ ıs a group return	for	
		SHA EVANS International Golf Drive			ites?	ΓYes Γ Nο	
		tona Beach, FL 321241092		H(b) Are a	II affiliates include	ed?	
				1		(see instructions)	
Tax-exem	npt status 🔽 50	1(c) (6) ◀ (ınsert no)	(a)(1) or 527		ip exemption nur		
Website	e: 🕨 www.lpga.co	om					
Form of or	nanization 🔽 Corn	oration Trust Association C	other 🌬	L Year of fo	rmation 1950 M	State of legal domicile FL	
Part I		oration production c	THE P	E rear or re	1730	State of legal dofficile 11	
		the organization's mission or	most significant activities				
,	TO PROMOTE	WORLDWIDE INTEREST IN	THE GAME OF WOMEN'S GOLF				
2						_	
2	Check this box	▶ If the organization discor	itinued its operations or disposed	l of more than	25% of its net a	ssets	
	Number of votir	, ig members of the governing b	oody (Part VI, line 1a)		3	1	
4			e governing body (Part VI, line 1				
)		employees (Part V, line 2a)		,		11	
6		volunteers (estimate if neces				1,80	
7a			Part VIII, column (C), line 12				
	-	usiness taxable income from	, , , , , , , , , , , , , , , , , , , ,		7b		
				Prio	or Year	Current Year	
8	Contributions	and grants (Part VIII, line 1h)			C	
≝ 9	Program servi	ce revenue (Part VIII, line 2g)		95,597,252	82,465,692	
9 10 10	Investment ın	come (Part VIII, column (A),		408,396	49,507		
Ÿ 11	Other revenue	(Part VIII, column (A), lines	5, 6d, 8c, 9c, 10c, and 11e)			(
12		•	t equal Part VIII, column (A), lır	e			
			<u> </u>		96,005,648	82,515,199	
13			olumn (A), lines 1-3)		148,900	195,312	
14	•		lumn (A), line 4)	_	450,000	450,000	
g 15	Salaries, other	compensation, employee ber	nefits (Part IX, column (A), lines	5-	8,134,602	6,457,374	
S 16a 16a b	•	ındraısıng fees (Part IX, colur	nn (A), line 11e)			C	
≚ ь	Total fundraising	expenses (Part IX, column (D), line	25) ▶ ⁰				
┙ 17			11a-11d, 11f-24f)		83,183,648	78,570,694	
18			ual Part IX, column (A), line 25)		91,917,150	85,673,38C	
19			om line 12		4,088,498	-3,158,181	
5 40		·		Beginnin	g of Current		
20 21 21 22 22 22 22 22 22 22 22 22 22 22				_	rear	End of Year	
20		Part X, line 16)			39,056,033	38,674,922	
置 21					29,886,100	32,663,170	
			1 from line 20		9,169,933	6,011,752	
Part II	Signature						
			nined this return, including accompanying in of preparer (other than officer) is base				
ign	<u> </u>		-11-12				
lere	Signature of o	fficer	Date				
		rpe CHIEF FINANCIAL OFFICER					
	Type or print r	name and title					
	Preparer's			Check If self-	Preparer's identify (see instructions)		
aid	signature			empolyed •	(see instructions)		
reparer's		ours DELOITTE TAX LLP	•				
se Only	ıf self-employed), address, and ZIP -	+ 4 333 SE 2ND AVENUE SUITE	3600		- EIN ►		
			-		Phone no 🕨 (30	05) 372-3100	
	1	MIAMI, FL 33131					

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

TO PROMOTE WORLDWIDE INTEREST IN THE GAME OF WOMEN'S GOLF

4e	i otai program se	rvice expenses ⊁ \$			
			grants or p	/ (Nevenue p	,
4d	Other program so	ervices (Describe in Schedule	,) (Revenue \$	`
	INDUSTRY	ED IN THE DEVELOPMENT OF A NUME	EK OF EDUCATIONAL AND INSTRUMENTAL	PROGRAMS FOR ITS MEMBERS A	IND OTHERS IN THE GOLF
4c	`	, , ,	including grants of \$ SER OF EDUCATIONAL AND INSTRUMENTAL) (Revenue \$	389,016)
	(Code) (Expenses \$	including grants of ¢) (Payanya †	290.016.\
	THE LPGA IS INVOLVE OTHER REGIONAL TO		NAMENTS FOR ITS LPGA T&CP DIVISION INC	CLUDING A NATIONAL CHAMPION:	SHIP, TEAM CLASSIC AND
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$	1,204,161)
			ne game of women's golf by providing tourr out the world Approximately 24 of these to		
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$	80,872,515)
4	Section 501(c)(3)	and 501(c)(4) organizations	each of the organization's three larg and section 4947(a)(1) trusts are r venue, if any, for each program serv	equired to report the amou	•
	If "Yes," describe	these changes on Schedule O			
3	Did the organization services?	3,	significant changes in how it condu · · · · · · · · · · ·	cts, any program	Yes 🔽 No
	If "Yes," describe	these new services on Schedu	le O		
2	Did the organization the prior Form 990		rogram services during the year whi	ch were not listed on	Yes 🔽 No

Dart TV	Checklist o	f Dequired	Schedules
	CHECKHISLU	ı Keuulleu	Juliculies

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		Νο
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νo
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		Νο
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		Νο
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ 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.			
	◆ 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.			
	◆ 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.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	♦ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No		<u>ا</u>	
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A No	ļ	ļ	
13	Is the organization a school described in section $170(b)(1)(A)(II)$? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		Νο
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	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States 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 and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		_
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? 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 a grant selection committee member, or to a person related to such an individual? 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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
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 of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
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, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	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		
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 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2009)

art V	Statements	Regarding	Other	TRS Filing	as and '	Tax Com	pliance
	ota to illoito	ive gar aring	•	-110 1 111111	goana	I GA COIII	Pilailee

			Yes	No
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
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			
ь	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 this return (see instructions)	2b	Yes	
la	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this	20		N o
h	return?	3a 3b		Νο
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νο
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
1	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?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
е	benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
L	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

100 International Golf Drive Daytona Beach, FL 321241092

(386) 274-6200

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.

Se	ction A. Governing Body and Management			
			Yes	No
4_				
1a b	Enter the number of voting members of the governing body 1a 15 Enter the number of voting members that are independent 1b 5			
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		Νo
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		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νo
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	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		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)		Yes	NI-
102	Does the organization have local chapters, branches, or affiliates?	10a	165	No No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10a		NO
11	affiliates, and branches to ensure their operations are consistent with those of the organization?	100		
		11		Νo
IIA	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13		Νo
14	Does 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?			
а	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 a or b, 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		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed FL			
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 make these available. Check all that apply			
19	Own website Another's website Vupon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne oraa	ınızatıor	n ▶ -
	Kathryn Milthorpe	9 -		-

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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. Use Schedule J-2 if additional space is needed

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

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

For	m 990 (2009)				Page 8
1b	Total	5,080,754	0		243,894
2	Total number of individuals (including but not limited to those listed above) who receiv \$100,000 in reportable compensation from the organization ▶20	ed more than	•		
				Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or higher on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	st compensated employee	3		Νο
4	For any individual listed on line 1a, is the sum of reportable compensation and other coorganization and related organizations greater than \$150,000? If "Yes," complete Scheolindividual	•	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated or rendered to the organization? <i>If</i> " <i>Yes,"</i> complete Schedule J for such person • • •	ganization for services	5		No
S	ection B. Independent Contractors				
1	Complete this table for your five highest compensated independent contractors that re \$100,000 of compensation from the organization	ceived more than			
	(A) Name and business address	(B) Description of services		(C Comper	
8540	SERMAN MEDIA GROUP D COLONNADE CENTER DRIVE SUITE 4 EIGH, NC 27615	MEDIA CONSULTING		·	184,191
350	MP INTERNATIONAL GOLF CLUB 5 SUMMIT BOULEVARD 5T PALM BEACH, FL 33406	CATERING SERVICES			154,817
PO E	OITTE TAX LLP 3OX 2079 OL STREAM, IL 601322079	ACCOUNTING & TAX			137,613

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization ▶3

Form 99								Page 9
Part V	<u>/1111</u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
\$ \$	1a	Federated camp	paigns 1a					
필드	b	Membership du	es 1b					
S, G	c	Fundraising eve	ents 1c					
Contributions, gifts, grants and other similar amounts	d	Related organiz	ations 1d					
Ę.	e	Government grants	s (contributions) 1e					
ntio er s	f	All other contribution	ons, gifts, grants, and 1f ot included above					
돌 돌	g	Noncash contri	butions included in					
걸	١.	lines 1a-1f \$ _		▶				
<u> </u>	h	iotal. Add lines	S 1a-1f					
e E		TOUDNIAMENT DEV	YENI IE	Business Code	52.672.504	52.072.504		
ven	2a	TOURNAMENT REV		711,300	62,973,694	62,973,694		
±24	b с	TELEVISION & MED		711,300	10,622,249	10,622,249		
Program Serwce Revenue	d	MEMBERSHIP & OT		711,300 711,300	4,396,575 4,084,158	4,396,575		
38	e e	EDUCATION/SEMIN		711,300	389,016	4,084,158 389,016		
Ē	f		am service revenue	711,300	369,010	389,010		
Do ¥	-							
	g		s 2a-2f		82,465,692			
	3		ome (including dividendar ar amounts)	. F	43,055			43,055
	4		tment of tax-exempt bond	· · ·	,			12,222
	5	Royalties		▶				
			(ı) Real	(II) Personal				
	6a	Gross Rents						
	b	Less rental expenses						
	c	Rental income or (loss)						
	d		me or (loss)	+				
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	1,397,263	6,050				
	١.	than inventory Less cost or	1,396,861					
	Ь	other basis and sales expenses	1,330,001					
	c	Gain or (loss)	402	6,050				
	d	Net gaın or (los	s)	▶	6,452			6,452
۸.	8a	Gross income for events (not incline)						
Other Revenue		\$	reported on line 1c)					
r CC		,	а					
ţ	b		penses b					
0	c		loss) from fundraising	events 🛌				
	9a	Gross income fi See Part IV, lin	rom gaming activities le 19 a					
	Ь		penses b					
	10a	Gross sales of	loss) from gaming acti	vities				
	100	returns and allo						
	Ь		oods sold b					
	С		loss) from sales of inve					
	11a	Miscellaneous	s kevenue	Business Code				
	ь							
	C							
	d	All other revenue	ue					
	e		s 11a-11d					
				▶				
	12	Total revenue.	See Instructions .	▶	82,515,199	82,465,692	0	49,507

Part IX Statement of Functional Expenses

Do not include amounts reported on lines 6b, 70, 8b, 9b, and 10b of Part VIII. Program service expenses Program service Program service expenses P	Section 501(c)(3) and 501(c)(4) organizations must complete all columns.								
Total expenses Program service	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).								
in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees. 5,080,754 Compensation not included above, to disqualified persons (as defined under section 4958(c)(3)(8) 7 Other salaries and wages 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions (include section 401(k) and section 403(b) employer contributions (include section 401(k) and section 403(b) employer contributions (include section 401(k) and section 403(b) employer (include section 403(b) employer (include section 401(k) and section	t and Fundraising								
U.S. See Part IV, line 22									
organizations, and individuals outside the U S See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(3)(8). 7 Other salaries and wages 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)									
S Compensation of current officers, directors, trustees, and key employees C Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) C Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits C 734,368 C 794,368 C									
key employees									
(as defined under section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) a Management b Legal c Accounting d Lobbying e Professional fundraising See Part IV, line 17 f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 0 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 394,839 </td <td></td>									
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)									
40 3 (b) employer contributions) 138,584 9 Other employee benefits 734,368 10 Payroll taxes 503,668 11 Fees for services (non-employees) 808,809 a Management 808,809 b Legal 808,809 c Accounting 209,815 d Lobbying 90,815 e Professional fundraising See Part IV, line 17 90,815 f Investment management fees 1,838,556 12 Advertising and promotion 1,838,556 13 Office expenses 68,857 14 Information technology 68,857 15 Royalites 90 16 Occupancy 1,432,107 17 Travel 1,432,107 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 12,200 19 Conferences, conventions, and meetings 123,200 20 Interest 123,200 21 Payments to affiliates 229,432 22 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)									
10 Payroll taxes									
Management									
Management									
b Legal									
c Accounting									
d Lobbying									
e Professional fundraising See Part IV, line 17									
f Investment management fees g Other									
g Other									
Advertising and promotion									
13 Office expenses									
Information technology									
15 Royalties									
16 Occupancy									
17 Travel									
Payments of travel or entertainment expenses for any federal, state, or local public officials									
state, or local public officials									
Interest									
Payments to affiliates									
Depreciation, depletion, and amortization									
23 Insurance									
Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)									
grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)									
a PRIZE MONEY 43,492,318									
b TOUR EXPENSE 13,178,571									
c TELEVISION EXPENSE 5,635,235									
d TOURNAMENT & SPONSOR 5,013,803									
e BAD DEBT EXPENSE 285,983									
f All other expenses 4,748,671									
25 Total functional expenses. Add lines 1 through 24f 85,673,380									
Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation									

Part X Balance Sheet (A) (B) Beginning of year End of year 1 1 Cash—non-interest-bearing 14.338.214 2 12.212.053 2 3 3 4 3,644,408 4 3.226.634 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 Notes and loans receivable, net 8 1,820,533 9 747,590 Land, buildings, and equipment cost or other basis Complete 6.731.179 10a 10a Part VI of Schedule D 2.680,606 **10c** 10b 3.690.607 3.040.572 b Less accumulated depreciation 10,452,709 11 12,727,023 11 4,696,133 12 5,110,195 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 1,423,430 14 1,610,855 15 15 16 39,056,033 16 38,674,922 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 5,474,872 17 8.517.515 17 Accounts payable and accrued expenses . 18 18 8,728,677 19 5,875,609 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 533,709 432.828 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties 24 15.148.842 17,837,218 25 Other liabilities Complete Part X of Schedule D 25 26 **Total liabilities.** Add lines 17 through 25 29,886,100 32,663,170 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 9.169.933 6.011.752 27 Unrestricted net assets 27 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 6,011,752 33 Total net assets or fund balances 9,169,933 33 34 Total liabilities and net assets/fund balances 39.056.033 38,674,922 34

Part XI Financial Statements and Reporting

			Yes	No
L	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	☐ Separate basis			
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?	3a		No
b	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	3b		

Form **990** (2009)

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DLN: 93493319073250

OMB No 1545-0047

(Form 990)

SCHEDULE D

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Open to Public

F ALLAC	i to roini 990. F See separate instructions.	Inspection
ame of the organization dies Professional Golf Association		Employer identification number
ules i foressional con i saccation		75-0055465
organizations Maintaining Don organization answered "Yes" to For		Funds or Accounts. Complete if the
organization answered tes to For	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate contributions to (during year)		
Aggregate grants from (during year)		
Aggregate value at end of year		
Did the organization inform all donors and dono funds are the organization's property, subject t		
Did the organization inform all grantees, donors used only for charitable purposes and not for th conferring impermissible private benefit	·	•
art III Conservation Easements. Com	plete if the organization answered "Yes	s" to Form 990, Part IV, line 7.
Purpose(s) of conservation easements held by Preservation of land for public use (e g , re Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a easement on the last day of the tax year	creation or pleasure)	f an historically importantly land area f a certified historic structure orm of a conservation
easement on the last day of the tax year		Held at the End of the Year
Total number of conservation easements		2a
Total acreage restricted by conservation ease	ments	2b
Number of conservation easements on a certifi		2c
Number of conservation easements included in	(c) acquired after 8/17/06	2d
Number of conservation easements modified, to the taxable year		
Does the organization have a written policy regenforcement of the conservation easements it		nandling of violations, and Yes No
Staff and volunteer hours devoted to monitorin	g, inspecting and enforcing conservation eas	sements during the year ►
A mount of expenses incurred in monitoring, ins	specting, and enforcing conservation easeme	ents during the year ► \$
Does each conservation easement reported on $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?		☐ Yes ☐ No
In Part XIV, describe how the organization rep balance sheet, and include, if applicable, the te the organization's accounting for conservation	ext of the footnote to the organization's finan	
	ections of Art, Historical Treasure ered "Yes" to Form 990, Part IV, line 8.	
If the organization elected, as permitted under art, historical treasures, or other similar asset provide, in Part XIV, the text of the footnote to	s held for public exhibition, education or rese	earch in furtherance of public service,
If the organization elected, as permitted under historical treasures, or other similar assets he provide the following amounts relating to these	ld for public exhibition, education, or researc	•
(i) Revenues included in Form 990, Part VIII,	line 1	▶ \$
(ii) Assets included in Form 990, Part X		▶ \$
If the organization received or held works of ar following amounts required to be reported unde		
Revenues included in Form 990, Part VIII, line	-	▶ \$

b Assets included in Form 990, Part X

	Using the organization's accession and othe	r records, check ar	_				e a sıgnıfıc				<u>continued)</u>
	items (check all that apply)			_							
а	Public exhibition		a	<u>'</u>			hange prog	rams			
Ь	Scholarly research		е	Г	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIV	ollections and expla	ain hov	w the	y furth	er the c	organizatioi	ı's ex	empt purpose	ın	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								ılar	┌ Yes	□No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ıf	the	organ	ızatıor			es" to Form 9	•	,
1a	Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?						┌ No				
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving t	able		Г		Δ.	nount	
С	Paganaga balanca						ŀ	1c		ilouiit	
d	Beginning balance						-	1d			
	Additions during the year						}				
e	Distributions during the year						}	1e			
r	Ending balance						L	1f			
2a	Did the organization include an amount on Fo		ie 21?							☐ Yes	No
	If "Yes," explain the arrangement in Part XIV				1 113 4						
Pa	rt V Endowment Funds. Complete	f the organizatio)Prior			o Years Back		t IV, line 10. Three Years Back	(e)Four	Years Back
1a	Beginning of year balance	(a) Curient Tear	(0	JETIOI	i cai	(C)IW	O Teals back	(u)	Tillee Tears back	(E)i oui	Teals back
b	Contributions										
c	Investment earnings or 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 yea	r end balance held	as								
а	Board designated or quasi-endowment	%									
ь	Permanent endowment - %										
c	Term endowment ► %								_		
	Are there endowment funds not in the nosses	ssion of the organiz	ation	that	are hel	d and a	dministere	d for	the		
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that	are hel	d and a	dmınıstere	d for	the	Yes	s No
	•	_	ation	that	are hel	d and a	dministere	d for	the 3a		s No
3a	organization by (i) unrelated organizations (ii) related organizations							d for		(i)	s No
3a	organization by (i) unrelated organizations	ns listed as require	 . d on S	Sched	 Iule R?			d for	3a	(i) ii)	S No
3a b 4	organization by (i) unrelated organizations		d on S	chec	 Iule R? Inds				3a	(i) ii)	s No
3a b 4	organization by (i) unrelated organizations		d on S	chec	 Iule R? Inds				3a	(i) ii)	s No
3a b 4	organization by (i) unrelated organizations		d on S	Schedent for See F	 Iule R? Inds			10.	3a	(i) (ii) b	Book value
b 4 Par	organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization Describe in Part XIV the intended uses of the control of		d on S	Schedent for See F	· · · lule R? Inds Form 9		art X, line (b)Cost or or basis (oth	10.	3a(3 3	(i) (ii) b	
b 4 Par	organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization Describe in Part XIV the intended uses of the control of investment Description of investment		d on S	Schedent for See F	· · · lule R? Inds Form 9		art X, line (b)Cost or basis (oth	10. other	3a(3 3	(i) ii) b	Book value
b 4 Par	organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization Describe in Part XIV the intended uses of the strict o		d on S	Schedent for See F	· · · lule R? Inds Form 9		art X, line (b)Cost or basis (oth	10. otherer)	3a(3 (c) Accumulated depreciation	(i) ii) b	Book value
b 4 Par 1a b c	organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization of the control of the contro		d on S	Schedent for See F	· · · lule R? Inds Form 9		(b)Cost or basis (oth	10. otherer)	3a(3 (c) Accumulated depreciation	(i)	Book value
b 4 Par 1a b c d	organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization Describe in Part XIV the intended uses of the tyle Investments—Land, Buildings Description of investment Land		d on S	Schedent for See F	· · · lule R? Inds Form 9		(b)Cost or basis (oth	10. other er)	(c) Accumulated depreciation	(i)	Book value 350,000 1,100,420

Part VII Investments—Other Securities. See (a) Description of security or category		2. (c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives Closely-held equity interests		
Other		
MERRILL LYNCH MONEY MARKET A/C	5,110,195	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	· '	
Part VIII Investments—Program Related. See	Form 990, Part X, line	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total (Column (h) should equal Form 990 Part V col (R) line 13)		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, line		
	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	ne 15. tion 5.)	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	ne 15. tion 5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	82,515,199
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	85,673,380
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-3,158,18
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	(
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-3,158,18
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Retu	rn
1	Total revenue, gains, and other support per audited financial statements	1	85,105,710
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 2,596,561		
e	Add lines 2a through 2d	2e	2,596,56
3	Subtract line 2e from line 1	3	82,509,149
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	6,050
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	82,515,199
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	
1	Total expenses and losses per audited financial statements	₁	88,263,89
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	2,596,56
3	Subtract line 2e from line 1	3	85,667,330
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b 6,050]	
c	Add lines 4a and 4b	4c	6,050
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	85,673,380
Pai	rt XIV Supplemental Information		
	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part III, lines 1 and 4, Part IIII	art IV , line	s 1b and 2b,

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Part XII, Line 2d - Other Adjustments		INV GAIN INCL SEPERATELY FOR FIN STMT PRESENTATION BUT NET FOR TAX PURPOSES 2596561
Part XII, Line 4b - Other Adjustments		GAIN ON SALE OF ASSETS OTHER THAN INVENTORY 6050
Part XIII, Line 2d - Other Adjustments		INV GAIN INCL SEPERATELY FOR FIN STMT PRESENTATION BUT NET FOR TAX PURPOSES 2596561
Part XIII, Line 4b - Other Adjustments		GAIN ON SALE OF ASSETS OTHER THAN INVENTORY 6050
		PART X, FIN 48 FOOTNOTE THERE ARE NO UNCERTAIN TAX POSITIONS NOTED ON THE MOST RECENTLY ISSUED FINANCIAL STATEMENTS

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SCHEDULE F

Department of the Treasury

(Form 990)

As Filed Data -

DLN: 93493319073250

01-1-----

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.
 ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number Ladies Professional Golf Association 75-0055465 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed) (d) Activities conducted in (e) If activity listed in (d) (f) Total expenditures (a) Region (b) Number of (c) Number of region (by type) (ie, is a program service, for region fundraising, program services, offices in the employees or describe specific type of grants to recipients located in agents in region region service(s) in region the region) 330,981 EAST ASIA & THE PACIFIC O PROGRAM SERVICES GOLF COMPETITION EUROPE O PROGRAM SERVICES GOLF COMPETITION 162,225 GOLF COMPETITION NORTH AMERICA O PROGRAM SERVICES 7,196 SOUTH AMERICA O PROGRAM SERVICES GOLF COMPETITION 26,825

Totals

0

527,227

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. Check this box if no one recipient received more than \$5,000 ▶ ☐ Use Schedule F-1 (Form 990) 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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total n tax-exempt	number of recipions by the IRS, or f	ent organizations lis or which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3 Enter total n	umber of other	organizations or en	tities					: (Earm 990) 2009

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. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

Identifier	ReturnReference	in Part I, line 2, and any additional information. Explanation
	+	

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Schedule I (Form 990)

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

OMB No 1545-0047

Employer identification number

75-0055465

2009

DLN: 93493319073250

2003

Department of the Treasury Internal Revenue Service Name of the organization

Ladies Professional Golf Association

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

Attach to Form 990

Open to Public Inspection

Part I General Inforn	nation on Grants	and Assistance					
 Does the organization mainstrain the selection criteria used Describe in Part IV the organization 	to award the grants o	or assistance?					▽ Yes ̄ N
Form 990, Part I	V, line 21 for any r	Governments and ecipient that received i) if additional space is	more than \$5,000.	Check this box if no	o one recipient rec	eived more than \$5,0	000. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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 LPGA FOUNDATION 100 INTERNATIONAL GOLF DRIVE DAYTONA BEACH,FL 32124	593085528	501(c)(3)	93,917		FMV	N/A	DONATION
THE ADVERTISING COUNCIL INC815 2ND AVENUE 9TH FLOOR NEWY YORK,NY 10017	130417693	NOT APPLICABLE	10,000		FMV	N/A	DONATION
OSPREY EVENTS INC1100 SPRING STREET SUITE 770 ATLANTA,GA 30309		NOT APPLICABLE	10,000		FMV	N/A	DONATION
JUNIOR LEAGUE OF CEDAR RAPIDS2100 1ST AVENUE NE CEDAR RAPIDS, IA 52402	426060212	501(c)(3)	9,000		FMV	N/A	DONATION
LEAD5703 ENTERPRISE PARKWAY EAST SYRACUSE,NY 13057		NOT APPLICABLE	5,100		FMV	N/A	DONATION
THE FIRST TEE OF SYRACUSE INC36 DRUMLINS TERRACE SYRACUSE,NY 13244		NOT APPLICABLE	30,000		FM∨	N/A	DONATION
FIRST TEE OF SUSQUEHANNA VALLEY 2040 LITITZ PIKE LANCASTER,PA 17601	232794483	501(c)(3)	15,000		FMV	N/A	DONATION
CONTRIBUTONS NOT THAN 5000100 INTERNATIONAL GOLF DRIVE DAYTONA BEACH,FL 32124		NOT APPLICABLE	22,295		FMV	N/A	DONATION

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, F	Part IV, line 22
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.						
Ident if ier	Return Reference	Explanation				
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 LADIES PROFESSIONAL GOLF ASSOCIATION TRANSFERS A PORTION OF THE REVENUE PRO AM HELD AS PLAYER PRIZE MONEY THE PLAYERS ELECT EACH YEAR TO DONATE THE FUNDS TO THE LPGA FOUNDATION LADIES PROFESSIONAL GOLF ASSOCIATION MAKES SURE THAT ALL TRANSFERS ARE USED FOR PROPER PURPOSES AND ARE NOT OTHERWISE DIVERTED FROM THE INTENDED USE ALL OTHER GRANTS ARE DONATIONS TO OUTSIDE ORGANIZATIONS				

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DLN: 93493319073250

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23. ► Attach to Form 990. ► See separate instructions. Open to Public Inspection

Name	of	t he	org	ani	zat	ion	
adies	Prof	essio	nal	Golf	Ass	ocia	tio

Employer identification number

75-0055465

Pa	rt I Questions Regarding Compensation			
			Yes	Νο
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account 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 orprovision of all 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 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	✓ Compensation committee ✓ Written employment contract			
	▼ Independent compensation consultant ▼ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	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) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		_
b	Any related organization?	6b		
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe			
	in Part III	8		
9	If "Yes" to 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 Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name (B) Breakdown of W-2 and/or 1099-MISC compensation (I) Base compensation (I) Davis compensation (II) Davis compensation (III) Other comp								
(i) Base incentive reportable compensation reportable compensation Form 990 or Form 990-EZ	(A) Name	(B) Breakdown of	W-2 and/or 1099-MI		(C) Retirement and		(E) Total of columns	
See Additional Data Table		(i) Base compensation	ıncentive	(iii) Other reportable compensation		benefits	(B)(ı)-(D)	Form 990 or
	See Additional Data Table							

Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
	Part I, Line 4a	FORM 990, SCH J THE FOLLOWING EMPLOYEES RECEIVED SEVERANCE IN 2009 CAROLYN BIVENS \$279,615 20 JILL PILGRIM \$37,303 21
Supplemental Information		COMPENSATION FOR THE FOLLOWING BOARD MEMBERS WAS RELATED TO TOURNAMENT PRIZE MONEY AND IS NOT ASSOCIATED WITH THEIR ACTIVITIES IN THE CAPACITY AS A BOARD MEMBER SHERRI STEINHAUER PAT HURST HELEN ALFREDSSON CHRISTINA KIM JULI INKSTER STACY PRAMMANASUDH JEAN BARTHOLOMEW KATIE FUTCHER IL MI CHUNG MICHELLE ELLIS PATRICIA BENSON

Schedule J (Form 990) 2009

Software ID: **Software Version:**

EIN: 75-0055465

Name: Ladies Professional Golf Association

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (B) Breakdown of W-2 and/or 1099-MISC compensation

(A) Name		(B) Breakdown of (i) Base Compensation	of W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation	SC compensation (iii) Other compensation	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
CAROLYN BIVENS	(1) (11)	627,433		0	9,800	18,820	881,174	
MARTY EVANS	(ı) (ıı)		0	0	0	0	230,254	0
PAT HURST	(1) (11)		0	0 0	0	0	371,424	0 0
JULI INKSTER	(1) (11)		0	0	0	0	268,816	0 0
STACY PRAMMANASUDH	(ı) (ıı)		0	0 0	0	0	216,698	0
HELEN ALFREDSSON	(ı) (ıı)		0	0	0	0	395,270	0
CHRISTINA KIM	(ı) (ıı)		0	0	0	0	362,069	0
ELIZA BETH GALLO WAY	(ı) (ıı)		· · · · · · · · · · · · · · · · · · ·	0	8,250 0	17,297 0	315,759	0
DAVID HIGDON	(1) (11)		0	0 0	0 0	22,231 0	173,690	0
JANE GEDDES	(ı) (ıı)		0	0	3,340	20,175 0	203,399	0
CAROL CORCORAN	(ı) (ıı)		0	0 0	1,500	10,216 0	236,538	0
ZAYRA CALDERON	(ı) (ıı)	232,322	0	0	7,200	8,9 4 5 0	248,467	0
KATHIE VU	(ı) (ıı)		10,875	0	4,650 0	20,607 0	189,062	0
MARY MOORE	(ı) (ıı)		0	0	4,500	9,256 0	165,460	0
WILLIAM SUSETKA	(ı) (ıı)		0	0	0	13,753 0	190,324	0
KELLY HYNE	(ı) (ıı)		30,500	0	4,350 0	7,106 0	185,896	0
JILL PILGRIM	(ı) (ıı)		ı • • • • • • • • • • • • • • • • • • •	0	2,590			0

DLN: 93493319073250

OMB No 1545-0047

Inspection

Schedule L

(Form 990 or 990-EZ)

Ladies Professional Golf Association

Department of the Treasury

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Internal Revenue Service Name of the organization

Employer identification number

		75-0055465			
Part I	Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).			
	Complete if the organization answered "Yes" on Form	990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line	40b		
1	(a) Name of disqualified person	(b) Description of transaction	(c) Correct		
-	(a)	(b) Description of transaction	Yes	No	

١.	et TT	Loon	- +-		-d /	~~	Ero	m T	nto		-t-o	4 D	0 = 1		_												_
3	Enter	the amo	unt c	fta	x, ıf	fany	y, on	lıne	2, a	abov	e, re	eımb	ours	ed	by t	he o	rga	nıza	atio	n.					\$ 		
	secti	on 4958	•	•				•	•		•	•	•	•	•		•		•	-		•			\$ 		_
		the amo								_				_								_					

Complete if the organi	zation a	answered	l "Yes" on Form 990), Part IV, line 26	, or Forn	า 990-เ	Z, Part V	, line 38	a	
(a) Name of interested person and purpose	or fro	oan to om the ization?	(c)O riginal principal amount	(d)Balance due	(e) I defaul		(f) Approv by boar committ	d or	(g) Writ agreeme	
	То	From			Yes	No	Yes	No	Yes	No

Total														•	\$				
Part	Ш	Gra	nts	or A	ssi	sta	nce	е В	ene	efit	ttin	g I	nte	res	tec	Persons.			
		Coi	mplet	e if t	the	ora	anız	zati	on .	ans	swe	rec	l "Ye	es" d	on F	orm 990. Part I	/. line 27.		

(a) Name of interested person

(b)Relationship between interested person and the organization

(c)A mount of grant or type of assistance

Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(b) Relationship

between interested (c) A mount of organization's (a) Name of interested person (d) Description of transaction person and the transaction organization Yes

See Additional Data Table

(e) Sharing of

revenues?

No

Software ID: Software Version:

EIN: 75-0055465

Name: Ladies Professional Golf Association

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (c) A mount of (a) Name of interested person (b) Relationship (d) Description of transaction (e) Sharing of between interested transaction \$ organızatıon's person and the revenues? organization Yes No 268,816 | SEE SCHED OTHE PLAYER/BOD Νo INKSTER GOLF ENTERPRISES TRANSACTION BETWEEN INKSTER GOLF ENTERPRISES, INC AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO COMPENSATION RECEIVED FROM TOURNAMENT PRIZE MONEY STACY P LLC PLAYER/BOD 216,698 | SEE SCHED OTHE Νo TRANSACTION BETWEEN STACY P, LLC AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO COMPENSATION RECEIVED FROM TOURNAMENT PRIZE MONEY MICHELLE ELLIS 10,300 SEE SCHED OTHE PLAYER/BOD Νo TRANSACTION BETWEEN MICHELLE ELLIS AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO COMPENSATION RECEIVED FROM TOURNAMENT PRIZE MONEY SHERRI STEINHAUER PLAYER/BOD 7,500 SEE SCHED OTHE TRANSACTION BETWEEN SHERRI STEINHAUER AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO COMPENSATION RECEIVED FROM TOURNAMENT PRIZE MONEY PAT HURST PLAYER/BOD 371,424 | SEE SCHED OTHE Νo TRANSACTION BETWEEN PAT HURST AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO COMPENSATION RECEIVED FROM TOURNAMENT PRIZE MONEY HELEN ALFREDSSON PLAYER/BOD 395,270 | SEE SCHED OTHE Νo TRANSACTION BETWEEN HELEN ALFREDSSON AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO COMPENSATION RECEIVED FROM TOURNAMENT PRIZE MONEY CHRISTINA KIM PLAYER/BOD 362,069 SEE SCHED OTHE Νo TRANSACTION BETWEEN CHRISTINA KIM AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO COMPENSATION RECEIVED FROM TOURNAMENT PRIZE MONEY IL MI CHUNG 126,168 SEE SCHED OTHE PLAYER/BOD Νo TRANSACTION BETWEEN IL MI CHUNG AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO COMPENSATION RECEIVED FROM TOURNAMENT PRIZE MONEY 9,250 SEE SCHED OTHE JEAN BARTHOLOMEW PLAYER/BOD Νo TRANSACTION BETWEEN JEAN BARTHOLOMEW AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO COMPENSATION RECEIVED FROM TOURNAMENT PRIZE MONEY KATIE FUTCHER PLAYER/BOD 129,102 SEE SCHED OTHE Νo TRANSACTION BETWEEN KATIE FUTCHER AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO COMPENSATION RECEIVED FROM TOURNAMENT PRIZE MONEY PATRICIA BENSON PLAYER/BOD 10,500 SEE SCHED OTHE Νo TRANSACTION BETWEEN KATIE FUTCHER AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO COMPENSATION RECEIVED

FROM TOURNAMENT PRIZE

MONEY

OMB No 1545-0047

SCHEDULE 0

Department of the Treasury Internal Revenue Service

(Form 990)

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990.

Supplemental Information to Form 990

Open to Public Inspection

Name of the organization Ladies Professional Golf Association

Employer identification number

75-0055465

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, Iine 6		THE MEMBERS OF THE LADIES PROFESSIONAL GOLF ASSOCIATION ARE THE PLAYERS
Form 990, Part VI, Section A, Iine 7a		THE RESERVED POWERS OF LADIES PROFESSIONAL GOLF ASSOCIATION PERMIT THE VOTING MEMBERSHIP TO ELECT ONE OR MORE MEMBERS OF THE GOVERNING BODY OF LADIES PROFESSIONAL GOLF ASSOCIATION
Form 990, Part VI, Section A, Inne 7b		THE DECISION'S OF MANAGEMENT ARE SUBJECT TO APPROVAL BY THE BOARD OF DIRECTORS OF LADIES PROFESSIONAL GOLF ASSOCIATION
Form 990, Part VI, Section B, Iine 11		THE LADIES PROFESSIONAL GOLF ASSOCIATION'S 2009 FORM 990 AND APPLICABLE SCHEDULES WERE REVIEWED BY MANAGEMENT BEFORE THE RETURN WAS FILED WITH THE INTERNAL REVENUE SERVICE
Form 990, Part VI, Section B, line 12c		LADIES PROFESSIONAL GOLF ASSOCIATION'S PRACTICES FOR MONITORING AND ENFORCING COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY BOARD MEMBERS WILL BE PROVIDED WITH A CONFLICT OF INTEREST REPORTING FORM ON AN ANNUAL BASIS ON WHICH TO REPORT AND DISCLOSE ANY REAL OR POTENTIAL CONFLICT OF INTEREST OR ETHICAL ISSUE TO THE LPGA. THE OBLIGATION TO REPORT ANY REAL OR POTENTIAL CONFLICT OF INTEREST OR ETHICAL ISSUE IS ONGOING, THEREFORE, BOARD MEMBERS ARE REQUIRED TO REPORT ANY CHANGE IN CIRCUMSTANCES WHENEVER THEY OCCUR DURING ANY CALENDAR YEAR EACH CONFLICT OF INTEREST REPORTING FORM SHALL BE SUBMITTED CONFIDENTIALLY FOR REVIEW TO THE CHIEF ADMINISTRATIVE OFFICER AND THE GENERAL COUNSEL, WHO ARE EMPOWERED TO RESOLVE ANY CONFLICT OF INTEREST OR ETHICAL ISSUE THAT MAY COMPROMISE A BOARD MEMBER'S ABILITY TO FULFILL HER OR HIS FIDUCIARY OBLIGATIONS TO THE LPGA. IN THE EVENT THAT A CONFLICT OF INTEREST OR ETHICAL ISSUE CANNOT BE SATISFACTORILY RESOLVED BY THE CHIEF ADMINISTRATIVE OFFICER AND THE GENERAL COUNSEL, THE MATTER SHALL BE REFERRED BY EITHER OF THEM TO THE LPGA GOVERNANCE COMMITTEE WHICH SHALL SEEK TO RESOLVE THE MATTER ANY MATTER THAT CANNOT BE RESOLVED BY THE ABOVE PROCEDURES SHALL BE REPORTED TO THE BOARD OF DIRECTORS FOR RESOLUTION
Form 990, Part VI, Section B, line 15		LADIES PROFESSIONAL GOLF ASSOCIATION'S PROCESS FOR DETERMINING COMPENSATION FOR ALL EXECUTIVES IS AS FOLLOWS. THE HUMAN RESOURCES COMMITTEE OF THE BOARD OF DIRECTORS IS CHARGED WITH RECOMMENDING THE APPOINTMENT, CONDUCTING PERFORMANCE REVIEWS AND DETERMINING THE COMPENSATION OF THE COMMISSIONER (CHIEF EXECUTIVE OFFICER). THIS RECOMMENDATION IS BASED ON THE FOLLOWING METHODS, INDEPENDENT COMPENSATION CONSULTING, COMPARABLE INDUSTRY KNOWLEDGE, AND MARKET SURVEYS. THE HR/COMPENSATION COMMITTEE RECOMMENDS TO THE ENTIRE BOARD OF DIRECTORS THE COMMISSIONERS BASE SALARY, BENEFITS AND PERFORMANCE BONUS, IF CERTAIN GOALS ARE MET.
Form 990, Part VI, Section C, Iine 18		LADIES PROFESSIONAL GOLF ASSOCIATION MAKES ITS FORMS 1023, 990, 990-T AVAILABLE FOR PUBLIC INSPECTION VIA U.S. MAIL UPON REQUEST
Form 990, Part VI, Section C, Ine 19		NO GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY OR FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC

ldentifier	Return Reference	Explanation
FORM 990, PART VII, SECTION A	THE FOLLOWING EMPLOYEES AND OFFICERS WERE TERMINATED IN 2009	BIVENS, CAROLYN PILGRIM, JILL THESE INDIVIDUALS MAY RECEIVE COMPENSATION/SEVERANCE PAYMENTS IN 2010

Form 990, Part XI, Line 2c Description of organization's committee oversight review process THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT REVIEW AND SELECTION OF AN INDEPENDENT ACCOUNTANT For Paperwork Reduction Act Notice, see the Instructions for Form 990 Cat No 51056K Schedule O (Form 990) 2009

DLN: 93493319073250

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Internal Revenue Service Name of the organization

Ladies Professional Golf Association

DAYTONA BEACH, FL 32124

59-3214096

Department of the Treasury

Employer identification number

75-0055465

(a) Name, address, and EIN 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
FGTA LLC 100 INTERNATIONAL GOLF DRIVE DAYTONA BEACH, FL 32124 26-0507044	DEVELOPMENTAL TOUR	FL	290,627	3,662,302	NOT APPLICABLE
LPGA TOURNAMENT PROPERTIES ONE LLC 100 INTERNATIONAL GOLF DRIVE DAYTONA BEACH, FL 32124 27-1317091	ADMINISTERING GOLF TOURNAMENTS	FL	0	87,658	LADIES PROFESSIONAL GOLF ASSOCIATION

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

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
THE LPGA FOUNDATION					
100 INTERNATIONAL GOLF DRIVE	CHARITABLE ACTIVITIES	FL	section 501(c)(3)	11 TYPE II	NOT APPLICABLE
DAYTONA BEACH, FL 32124 59-3085528 DAYTONA BEACH GOLF CHARITIES					
100 INTERNATIONAL GOLF DRIVE	CHARITABLE ACTIVITIES	FL	section 501(c)(3)	NOT APPLICABLE	NOT APPLICABLE

(j)

General or

managing

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)

al (d)
cile Direct controlling
or entity
gn

(e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

(f) Share of total income (g) Share of end-of-year assets (h)
Disproprtionate
allocations? ai

(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)

hedule K-1 partner? form 1065)

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

(3) THE LPGA FOUNDATION

(4) THE LPGA FOUNDATION

(5) THE LPGA FOUNDATION

(6)

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

	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to other organization(s)	1b	Yes	
c	Gift, grant, or capital contribution from other organization(s)	1c		No
d	Loans or loan guarantees to or for other organization(s)	1d	Yes	
e	Loans or loan guarantees by other organization(s)	1e		No
f	Sale of assets to other organization(s)	1f		No
g	Purchase of assets from other organization(s)	1 g		No
h	Exchange of assets	1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
ı	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
m	Sharing of facilities, equipment, mailing lists, or other assets	1m	Yes	
n	Sharing of paid employees	1n	Yes	
0	Reimbursement paid to other organization for expenses	10		No
р	Reimbursement paid by other organization for expenses	1p	Yes	
q	O ther transfer of cash or property to other organization(s)	1q		No
r	O ther transfer of cash or property from other organization(s)	1r		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			
	(b) Transaction		(c)	
	Name of other organization type(a-r)	moun	t involv	ed .
(1) T	HE LPGA FOUNDATION			93,917
(2) T	HE LPGA FOUNDATION		1	45,152
	D		1	73,132

Schedule R (Form 990) 2009

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23,167

115,103

220,088

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No

Software ID: Software Version:

EIN: 75-0055465

Name: Ladies Professional Golf Association

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

(A) Name and Title	(B) Average hours	Posi	((tion (hat a	c) (che	cka	II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
CAROLYN BIVENS COMMISSIONER - 7/13/09	60 00	X			Х			852,554	0	28,620
JEAN BARTHOLOMEW PLAYER/DIRECTOR (PRIZE)	5 00	X						9,250	0	0
DAWN HUDSON CHAIRMAN	5 00	X						0	0	0
LESLIE GREIS DIRECTOR	5 00	X						0	0	0
NANCY WIESE DIRECTOR	5 00	X						0	0	0
BILL MORTON DIRECTOR	5 00	X						0	0	0
MARTY EVANS ACTING COMMISSIONER	40 00	Χ			X			230,254	0	0
MICHELLE ELLIS PLAYER/DIRECTOR	5 00	X		X				10,300	0	0
SHERRI STEINHAUER PLAYER/DIRECTOR (PRIZE)	5 00	X		Χ				7,500	0	0
PATRICIA BENSON TCP PRESIDENT	5 00	X						10,500	0	0
PAT HURST PLAYER/DIRECTOR (PRIZE)	5 00	X						371,424	0	0
JULI INKSTER PLAYER/DIRECTOR (PRIZE)	5 00	X						268,816	0	0
STACY PRAMMANASUDH PLAYER/DIRECTOR (PRIZE)	5 00	X						216,698	0	0
HELEN ALFREDSSON PLAYER/DIRECTOR (PRIZE)	5 00	X						395,270	0	0
CHRISTINA KIM PLAYER/DIRECTOR (PRIZE)	5 00	X						362,069	0	0
KATIE FUTCHER PLAYER/DIRECTOR (PRIZE)	5 00	X						129,102	0	0
IL MI CHUNG PLAYER/DIRECTOR (PRIZE)	5 00	X						126,168	0	0
GRANT GREGORY DIRECTOR - 5/1/09	5 00	X						0	0	0
ELIZABETH GALLOWAY SECRETARY - 12/31/09	60 00			X				290,212	0	25,547
DEBBIE RIDGEWAY TREASURER	60 00			X				93,280	0	22,557
ZANDRIA CONYERS SECRETARY - 12/4/09	60 00			Х				88,655	0	19,072
DAVID HIGDON CHIEF COMMUNICATIONS OFF	60 00				X			151,459	0	22,231
JANE GEDDES SR VP OF TOUR OPERATION	60 00				Х			179,884	0	23,515
CAROL CORCORAN CHIEF ADMINISTRATIVE OFF	60 00				Χ			224,822	0	11,716
ZAYRA CALDERON EVP TOUR DEVELOPMENT	60 00				Х			232,322	0	16,145

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

(A) Name and Title	(B) A verage hours	A verage Position (check all hours that apply)				(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other			
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
KATHIE VU VP CORPORATE P/SHIPS	55 00				•	Х	•	163,805	C	25,2!	57
MARY MOORE SR VP PROF DEVELOPMENT	55 00					Х		151,704	C	13,7!	56
WILLIAM SUSETKA CHIEF MKT OFFICER 06/09	55 00					Х		176,571	C	13,7!	53
KELLY HYNE VP OF LPGA PROPERTIES	55 00					Х		174,440	O	11,4!	56
JILL PILGRIM GENERAL COUNSEL 10/7/09	55 00					X		163,695	C	10,26	69

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

•					
	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
TOURNAMENT REVENUE	711,300	62,973,694	62,973,694		
TELEVISION & MEDIA REV	711,300	10,622,249	10,622,249		
CORP SPONSORSHIPS	711,300	4,396,575	4,396,575		
MEMBERSHIP & OTHER INC	711,300	4,084,158	4,084,158		
EDUCATION/SEMINARS	711,300	389,016	389,016		

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
PRIZE MONEY	43,492,318			
TOUR EXPENSE	13,178,571			
TELEVISION EXPENSE	5,635,235			
TOURNAMENT & SPONSOR	5,013,803			
BAD DEBT EXPENSE	285,983			