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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 black lung benefit trust or private foundation)

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

Ladies Professional Golf Association

Doing Business As

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

Room/suite

100 International Golf Drive

City or town, state or country, and ZIP + 4

Daytona Beach, FL 32124

F Name and address of principal officer

Kathryn H Milthorpe

100 International Golf Drive

Daytona Beach, FL 32124

D Employer identification number

75-0055465

E Telephone number

(386) 274-6200

G Gross receipts \$ 73,861,904

I Tax-exempt status

☐ 501(c)(3)

☒ 501(c) (6)

(insert no)

☐ 4947(a)(1) or

☐ 527

J Website:

www.lpga.com

K Form of organization

☒ Corporation

☐ Trust

☐ Association

☐ Other

L Year of formation

1950

M State of legal domicile

FL

Part I	Summary																																
Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO PROMOTE WORLDWIDE INTEREST IN THE GAME OF WOMEN'S PROFESSIONAL GOLF																																
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets																																
Revenue	<table><tr><td>3</td><td>Number of voting members of the governing body (Part VI, line 1a)</td><td>15</td></tr><tr><td>4</td><td>Number of independent voting members of the governing body (Part VI, line 1b)</td><td>6</td></tr><tr><td>5</td><td>Total number of individuals employed in calendar year 2011 (Part V, line 2a)</td><td>98</td></tr><tr><td>6</td><td>Total number of volunteers (estimate if necessary)</td><td>2,500</td></tr><tr><td>7a</td><td>Total unrelated business revenue from Part VIII, column (C), line 12</td><td>0</td></tr><tr><td>7b</td><td>Net unrelated business taxable income from Form 990-T, line 34</td><td>0</td></tr></table>	3	Number of voting members of the governing body (Part VI, line 1a)	15	4	Number of independent voting members of the governing body (Part VI, line 1b)	6	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	98	6	Total number of volunteers (estimate if necessary)	2,500	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0	7b	Net unrelated business taxable income from Form 990-T, line 34	0														
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Expenses	<table><tr><td>13</td><td>Grants and similar amounts paid (Part IX, column (A), lines 1–3)</td><td>296,809</td><td>266,076</td></tr><tr><td>14</td><td>Benefits paid to or for members (Part IX, column (A), line 4)</td><td>550,000</td><td>650,000</td></tr><tr><td>15</td><td>Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)</td><td>8,328,088</td><td>8,952,128</td></tr><tr><td>16a</td><td>Professional fundraising fees (Part IX, column (A), line 11e)</td><td>0</td><td>0</td></tr><tr><td>b</td><td>Total fundraising expenses (Part IX, column (D), line 25) ▶⁰</td><td></td><td></td></tr><tr><td>17</td><td>Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)</td><td>63,192,649</td><td>62,316,106</td></tr><tr><td>18</td><td>Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)</td><td>72,367,546</td><td>72,184,310</td></tr><tr><td>19</td><td>Revenue less expenses Subtract line 18 from line 12</td><td>1,320,615</td><td>1,671,461</td></tr></table>	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	296,809	266,076	14	Benefits paid to or for members (Part IX, column (A), line 4)	550,000	650,000	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	8,328,088	8,952,128	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ ⁰			17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	63,192,649	62,316,106	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	72,367,546	72,184,310	19	Revenue less expenses Subtract line 18 from line 12	1,320,615	1,671,461
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Net Assets or Fund Balances	<table><tr><th></th><th>Beginning of Current Year</th><th>End of Year</th></tr><tr><td>20</td><td>Total assets (Part X, line 16)</td><td>39,453,603</td><td>41,713,829</td></tr><tr><td>21</td><td>Total liabilities (Part X, line 26)</td><td>32,121,236</td><td>32,710,001</td></tr><tr><td>22</td><td>Net assets or fund balances Subtract line 21 from line 20</td><td>7,332,367</td><td>9,003,828</td></tr></table>		Beginning of Current Year	End of Year	20	Total assets (Part X, line 16)	39,453,603	41,713,829	21	Total liabilities (Part X, line 26)	32,121,236	32,710,001	22	Net assets or fund balances Subtract line 21 from line 20	7,332,367	9,003,828																	
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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

2012-10-31

Date

KATHRYN MILTHORPE CFO/TREASURER

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

Dawn M Olivardia

Date

Check if self-employed ☐

Preparer's taxpayer identification number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4

Grant Thornton LLP

200 SOUTH ORANGE AVE SUITE 2050

Orlando, FL 32801

EIN

▶

Phone no ▶ (407) 481-5100

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 (2011)

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

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

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 and section 4947(a)(1) trusts 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 \$ including grants of \$) (Revenue \$ 72,189,242)

THE LADIES PROFESSIONAL GOLF ASSOCIATION IS ORGANIZED TO PROMOTE WORLDWIDE INTEREST IN THE GAME OF WOMEN'S GOLF BY PROVIDING TOURNAMENTS, INSTRUCTIONAL, AND PROFESSIONAL DEVELOPMENT PROGRAMS. THE LADIES PROFESSIONAL GOLF ASSOCIATION SANCTIONS LPGA AND FUTURES TOUR EVENTS THROUGHOUT THE WORLD.

4b

(Code) (Expenses \$ including grants of \$) (Revenue \$ 1,167,466)

THE LADIES PROFESSIONAL GOLF ASSOCIATION IS INVOLVED IN HOSTING A NUMBER OF TOURNAMENTS FOR ITS LPGA T&CP MEMBERSHIP INCLUDING A NATIONAL CHAMPIONSHIP, TEAM CLASSIC AND OTHER REGIONAL TOURNAMENTS.

4c

(Code) (Expenses \$ including grants of \$) (Revenue \$ 495,089)

THE LADIES PROFESSIONAL GOLF ASSOCIATION IS INVOLVED IN THE DEVELOPMENT OF A NUMBER OF EDUCATIONAL AND INSTRUCTIONAL PROGRAMS FOR ITS MEMBERS AND OTHERS IN THE GOLF INDUSTRY.

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses \$

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)? <i>If "Yes," complete Schedule A</i>	1	No
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2	No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	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? <i>If "Yes," complete Schedule C, Part II</i>	4	
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? <i>If "Yes," complete Schedule C, Part III</i>	5	No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i> 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 	8	No
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? <i>If "Yes," complete Schedule D, Part IV</i> 	9	No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 	10	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? <i>If "Yes," complete Schedule D, Part VI.</i> 	11a	Yes
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> 	11b	Yes
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> 	11c	No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i> 	11d	No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	11e	Yes
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i> 	11f	No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> 	12a	Yes
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i> 	12b	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Part I</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 ? <i>If "Yes," complete Schedule F, Part II and IV</i> 	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Part III and IV</i> 	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b	

Part 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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		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? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V		Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response to any question in this Part V ☐					
			Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a	594		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	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. .	2a	98		
b	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).	2b	Yes		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b			
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 or securities account)?	4a			No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
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?	6a			No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
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?	7a			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	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			
10	Section 501(c)(7) organizations. Enter				
a	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.	10b			
11	Section 501(c)(12) organizations. Enter				
a	Gross income from members or shareholders.	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b			
12a	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.	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a			
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b			
c	Enter the aggregate amount of reserves on hand.	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b			

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1a	15		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	6
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	Yes
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	Yes
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 the 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	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 made these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request	
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. See Additional Data Table.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	
	KATHRYN MILTHORPE 100 INTERNATIONAL GOLF DRIVE Daytona Beach, FL 32124 (386) 274-6200	

Part VII

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

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

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

- 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, if any See instructions for definition of “key employee ”
- List the organization’s five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization’s **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization’s **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
(1) William Susetka Chairman	3 0	X						0	0	0
(2) Karen Jennings Director	2 0	X						0	0	0
(3) Leslie Greis Director	2 0	X						0	0	0
(4) Peter Carfagna Director	2 0	X						0	0	0
(5) Michael Trager Director	2 0	X						0	0	0
(6) Roberta Bowman Director	2 0	X						0	0	0
(7) Michelle Ellis President/Player/Director	5 0	X		X				10,000	0	0
(8) Stacy Prammanasudh Player/Director (PRIZE)	5 0	X						139,107	0	0
(9) Kathleen Futch Player/Director (PRIZE)	5 0	X						375,888	0	0
(10) Helen Alfredsson Player/Director (PRIZE)	5 0	X						2,400	0	0
(11) Kim Hall Vice President/Player/Director	5 0	X		X				0	0	0
(12) Allison Fouch Player/Director (PRIZE)	5 0	X						19,427	0	0
(13) Karrie Webb Player/Director (PRIZE)	5 0	X						511,543	0	0
(14) Dana Rader Player/Director	5 0	X						11,000	0	0
(15) Michael Whan Commissioner	40 0	X			X			636,138	0	20,360
(16) Kathryn Milthorpe CFO/Secretary/Treasurer	40 0			X				180,071	0	20,781
(17) Zayra Calderon EVP Futures Tour/Intl Events	40 0				X			220,074	0	10,814

Part VII

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
(18) Jon Podany EVP/CMO	40 0				X			326,753	0	19,766
(19) Nancy Henderson Sr VP/Exec Dir TCP	40 0				X			159,540	0	9,230
(20) Jane Geddes Sr VP/Tour Operations	40 0				X			145,174		15,317
(21) Kelly Hyne VP PGA Properties	40 0					X		147,317	0	8,373
(22) Mary Moore Sr VP/Prof Development	40 0					X		150,531	0	9,994
(23) Michael Nichols VP/TBA	40 0					X		139,407	0	19,709
(24) Edward Willett VP/Business Development	40 0					X		148,702	0	11,147
(25) Scott Ensign Sr Director/Corp Partnerships	40 0					X		125,148		13,230
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								3,448,220	0	158,721

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▶16

		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 Yes	
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
Grant Thornton PO Box 532019 ATLANTA, GA 30353	audit/tax	160,848
Physiofitness Associates 87 S High Street DUBLIN, OH 43017	physical therapy	206,415
Winnercom PO Box 83245 CHICAGO, IL 60691	website services	308,460
Bright Horizons PO Box 277878 ATLANTA, GA 30384	child care program	220,096
R2IT 3380 Fairlane Farms Road Ste 9 WELLINGTON, FL 33414	scoring services	1,372,146
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶5		

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f		0				
Program Service Revenue			Business Code					
	2a	TOURNAMENT REVENUE	711300	54,382,517	54,382,517			
	b	TELEVISION & MEDIA REVENUE	711300	8,641,532	8,641,532			
	c	CORPORATE SPONSORSHIPS	711300	6,192,998	6,192,998			
	d	MEMBERSHIP & OTHER INCOME	711300	4,139,661	4,139,661			
	e	EDUCATION/PROF DEV	711300	495,089	495,089			
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		73,851,797				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		3,107			3,107	
	4	Income from investment of tax-exempt bond proceeds . .		0				
	5	Royalties		0				
	6a	Gross rents	(i) Real	(ii) Personal				
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)						
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
				7,000				
				6,133				
				867				
	d	Net gain or (loss)		867			867	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
	b	Less direct expenses	b					
	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	b					
	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	b						
c	Net income or (loss) from sales of inventory . .		0					
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d		0					
12	Total revenue. See Instructions		73,855,771	73,851,797		3,974		

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) but are not required to complete columns (B), (C), and (D)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	266,076			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	650,000			
5	Compensation of current officers, directors, trustees, and key employees	2,737,115			
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	5,045,650			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	64,301			
9	Other employee benefits	652,710			
10	Payroll taxes	452,352			
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	347,554			
c	Accounting	327,542			
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	875,040			
12	Advertising and promotion	2,144,266			
13	Office expenses	81,037			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	1,264,781			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	58,871			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	605,105			
23	Insurance	247,198			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	PRIZE MONEY	34,958,008			
b	TOURNAMENT EXPENSE	9,493,018			
c	TELEVISION & MEDIA	8,715,502			
d	CORPORATE SPONSOR	1,578,804			
e					
f	All other expenses	1,619,380			
25	Total functional expenses. Add lines 1 through 24f	72,184,310			
26	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720) 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
Assets	1	Cash—non-interest-bearing			0	1	0
	2	Savings and temporary cash investments			9,770,843	2	12,894,092
	3	Pledges and grants receivable, net			0	3	0
	4	Accounts receivable, net			4,609,174	4	3,379,317
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			0	5	0
	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 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			555,123	9	953,774
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a	7,290,487			
	b	Less: accumulated depreciation	10b	4,278,141	3,075,543	10c	3,012,346
	11	Investments—publicly traded securities			14,684,280	11	14,827,683
	12	Investments—other securities. See Part IV, line 11			4,779,115	12	4,460,447
	13	Investments—program-related. See Part IV, line 11			0	13	0
	14	Intangible assets			1,979,525	14	2,186,170
	15	Other assets. See Part IV, line 11			0	15	0
16	Total assets. Add lines 1 through 15 (must equal line 34)			39,453,603	16	41,713,829	
Liabilities	17	Accounts payable and accrued expenses			4,390,996	17	5,739,842
	18	Grants payable			0	18	0
	19	Deferred revenue			7,860,409	19	7,416,600
	20	Tax-exempt bond liabilities			0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			0	21	0
	22	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			406,436	23	265,429
	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			19,463,395	25	19,288,130
	26	Total liabilities. Add lines 17 through 25			32,121,236	26	32,710,001
	Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
27		Unrestricted net assets			7,332,367	27	9,003,828
28		Temporarily restricted net assets			0	28	0
29		Permanently restricted net assets			0	29	0
Organizations that do not follow SFAS 117, check here ☐ 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			7,332,367	33	9,003,828
34	Total liabilities and net assets/fund balances			39,453,603	34	41,713,829	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	73,855,771
2	Total expenses (must equal Part IX, column (A), line 25)	2	72,184,310
3	Revenue less expenses Subtract line 2 from line 1	3	1,671,461
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,332,367
5	Other changes in net assets or fund balances (explain in Schedule O)	5	
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	9,003,828

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ 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?		No
b	Were the organization's financial statements audited by an independent accountant?	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	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 separate basis, consolidated basis, or both ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separated 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?		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		

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047
2011
Open to Public Inspection

Name of the organization
Ladies Professional Golf Association

Employer identification number
75-0055465

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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" to Form 990, Part IV, line 7.

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

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

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

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____

4 Number of states where property subject to conservation easement is located ► _____

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

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
► \$ _____

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

☐ Yes ☐ No

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

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

1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items

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

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

► \$ _____
► \$ _____

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

a Revenues included in Form 990, Part VIII, line 1
b Assets included in Form 990, Part X

► \$ _____
► \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2011

Part III

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

3

Using the organization's 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 XIV

5

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

☐ Yes

☐ No

Part IV

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

1a

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

☐ Yes

☐ No

b

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

	Amount
1c	
1d	
1e	
1f	

1c

Beginning balance

1d

Additions during the year

1e

Distributions during the year

1f

Ending balance

2a

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

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance				
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 year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

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

b

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

	Yes	No
3a(i)		
3a(ii)		
3b		

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	350,000		350,000
b Buildings	0	2,015,183	1,069,932	945,251
c Leasehold improvements				
d Equipment	0	500,025	312,348	187,677
e Other	0	4,425,279	2,895,861	1,529,418
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				3,012,346

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	173,855,771
2	Total expenses (Form 990, Part IX, column (A), line 25)	272,184,310
3	Excess or (deficit) for the year Subtract line 2 from line 1	31,671,461
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net) Add lines 4 - 8	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	1,671,461

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	173,429,314
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a	
b	Donated services and use of facilities2b	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e	
3	Subtract line 2e from line 13	73,429,314
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 7b4a	
b	Other (Describe in Part XIV)4b426,457	
c	Add lines 4a and 4b4c426,457	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)5	73,855,771

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	171,757,853
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a	
b	Prior year adjustments2b	
c	Other losses2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e	
3	Subtract line 2e from line 13	71,757,853
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 7b4a	
b	Other (Describe in Part XIV)4b426,457	
c	Add lines 4a and 4b4c426,457	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)5	72,184,310

Part XIVSupplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, 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

Identifier	Return Reference	Explanation
Supplemental Description - Other	Schedule D, Part XII, Line 4B	INVESTMENT LOSS INCLUDED SEPARATELY FOR FINANCIAL STATEMENT PRESENTATION BUT NET FOR TAX PURPOSES \$425,590 GAIN ON SALE OF ASSETS OTHER THAN INVENTORY \$867
Supplemental Description - Other	Schedule D, Part XIII, Line 4B	INVESTMENT LOSS INCLUDED SEPARATELY FOR FINANCIAL STATEMENT PRESENTATION BUT NET FOR TAX PURPOSES \$425,590 GAIN ON SALE OF ASSETS OTHER THAN INVENTORY \$867

[illegible]

3 Enter total number of other organizations or entities ►

Part III

(h) Method of valuation (book, FMV, appraisal, other)

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 (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 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐

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, 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).*

☐

Yes

☒

No

Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

[illegible]

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
Ladies Professional Golf Association

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Employer identification number
75-0055465

Part I General Information on Grants and Assistance

1

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

☒ Yes ☐ No

2

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) The LPGA Foundation100 International Golf Drive Daytona Beach,FL 32124	59-3085528	501(c)(3)	194,000		FMV	N/A	
(2) World Golf FoundationOne World Golf Place St Augustine,FL 32092	59-2998925	501(c)(3)	15,000		FMV	N/A	
(3) Daytona Regional ChamberPO Box 2676 Daytona Beach,FL 32115	59-0215990	501(c)(6)	7,241		FMV	N/A	
(4) United Way of Volusia County3747 W Intl Speedway Blvd Daytona Beach,FL 32124	59-1099774	501(c)(3)	5,750		FMV	N/A	
(5) Contributions not than 5000100 INTERNATIONAL GOLF DRIVE DAYTONA BEACH,FL 32124			44,085		FMV	N/A	

2

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

24

3

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

2

Part III

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

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
Schedule I, Part I, Line 2 The Ladies Professional Golf Association		TOURNAMENT PLAYERS ELECT TO DONATE ALL PRO AM REVENUE RECEIVED BY THE LPGA FROM TOURNAMENT SPONSORS TO THE LPGA FOUNDATION THE 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 THIRD PARTY UNRELATED ORGANIZATIONS

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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.

Name of the organization
Ladies Professional Golf Association

Employer identification number
75-0055465

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 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 ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ 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 the expenses described above? If "No," complete Part III to explain	1b	Yes
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	Yes
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 ☒ Independent compensation consultant ☐ Form 990 of other organizations ☒ Written employment contract ☒ Compensation survey or study ☒ 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		
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) 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		
a	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		
a	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 accrued 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)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) Kathleen Futcher	(i)	0	0	375,888	0	0	375,888	0
	(ii)	0	0	0	0	0	0	0
(2) Karrie Webb	(i)	0	0	511,543	0	0	511,543	0
	(ii)	0	0	0	0	0	0	0
(3) Michael Whan	(i)	496,138	140,000	0	0	20,360	656,498	0
	(ii)	0	0	0	0	0	0	0
(4) Kathryn Milthorpe	(i)	160,071	20,000	0	0	20,781	200,852	0
	(ii)	0	0	0	0	0	0	0
(5) Zayra Calderon	(i)	208,074	12,000	0	0	10,814	230,888	0
	(ii)	0	0	0	0	0	0	0
(6) Jon Podany	(i)	279,253	47,500	0	0	19,766	346,519	0
	(ii)	0	0	0	0	0	0	0
(7) Nancy Henderson	(i)	159,540	0	0	0	9,230	168,770	0
	(ii)	0	0	0	0	0	0	0
(8) Kelly Hyne	(i)	147,317	0	0	0	8,373	155,690	0
	(ii)	0	0	0	0	0	0	0
(9) Mary Moore	(i)	150,531	0	0	0	9,994	160,525	0
	(ii)	0	0	0	0	0	0	0
(10) Michael Nichols	(i)	139,407	0	0	0	19,709	159,116	0
	(ii)	0	0	0	0	0	0	0
(11) Edward Willett	(i)	148,702	0	0	0	11,147	159,849	0
	(ii)	0	0	0	0	0	0	0
(12) Jane Geddes	(i)	135,174	10,000	0		15,317	160,491	
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

Identifier	Return Reference	Explanation
Compensation for the following board members was related to tournament	prize winnings received in conjunction with competing in LPGA tournaments	and is not associated with their activities in the capacity as a board member. Stacy Prammanasudh, Helen Alfredsson, Kathleen Fitcher, Allison Fouch, Karrie Webb.

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047
2011
Open to Public Inspection

Name of the organization
Ladies Professional Golf Association

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) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ▶ \$ _____										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
See Additional Data Table					

Part V

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

Identifier	Return Reference	Explanation
PLEASE SEE SCHEDULE O FOR ADDITIONAL INFORMATION FOR	PART IV BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS	

Additional Data

Software ID:
Software Version:
EIN: 75-0055465
Name: Ladies Professional Golf Association

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction \$	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
Michelle Ellis	Player/BOD	10,000	Stipend - LPGA Tour President		No
Stacy P LLC	Player/BOD	139,107	Prize winnings		No
Ayrwaves Inc	Player/BOD	511,543	Prize winnings		No
Helen Alfredsson	Player/BOD	2,400	Prize winnings		No
Allison Fouch	Player/BOD	19,427	Prize winnings		No
KMF Group LLC	Player/BOD	375,888	Prize winnings		No
Dana Rader	Player/BOD	11,000	Stipend - TCP Pres/Evaluator		No

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization Ladies Professional Golf Association	Employer identification number 75-0055465
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Identifier	Return Reference	Explanation
MEMBERS OR STOCKHOLDERS	FORM 990, PART VI, LINE 6	THE MEMBERS OF THE LADIES PROFESSIONAL GOLF ASSOCIATION ARE THE TOURNAMENT PLAYERS AND TEACHING AND CLUB PROFESSIONAL MEMBERSHIP

Identifier	Return Reference	Explanation
MEMBERS OR STOCKHOLDERS WHO MAY ELECT	FORM 990, PART VI, LINE 7A	THE RESERVED POWERS OF THE LADIES PROFESSIONAL GOLF ASSOCIATION PERMIT THE VOTING MEMBERSHIP TO ELECT ONE OR MORE MEMBERS OF THE GOVERNING BODY OF THE LADIES PROFESSIONAL GOLF ASSOCIATION

Identifier	Return Reference	Explanation
DECISIONS SUBJECT TO APPROVAL	FORM 990, PART VI, LINE 7B	THE KEY DECISIONS OF MANAGEMENT ARE SUBJECT TO THE APPROVAL BY THE BOARD OF DIRECTORS OF THE LADIES PROFESSIONAL GOLF ASSOCIATION

Identifier	Return Reference	Explanation
FORM 990 REVIEW PROCESS	FORM 990, PART VI, LINE 11B	THE FORM 990 WAS PROVIDED TO THE LADIES PROFESSIONAL GOLF ASSOCIATION FINANCE COMMITTEE AND BOARD OF DIRECTORS FOR REVIEW PRIOR TO THE FILING OF THE RETURN. AFTER ALL QUESTIONS AND COMMENTS ARE RESOLVED, THE TAX RETURN IS FILED BY THE EXTENDED DUE DATE.

Identifier	Return Reference	Explanation
CONFLICT OF INTEREST POLICY MONITORING & ENFORCEMENT	FORM 990, PART VI, LINE 12C	BOARD MEMBERS ARE 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 LADIES PROFESSIONAL GOLF ASSOCIATION THE OBLIGATION TO REPORT SUCH CONFLICTS OR ISSUES 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 CORPORATE SECRETARY OR THE GENERAL COUNSEL FOR REVIEW THESE INDIVIDUALS ARE EMPOWERED TO RESOLVE ANY CONFLICT OF INTEREST OR ETHICAL ISSUE THAT MAY COMPROMISE A BOARD MEMBER'S ABILITY TO FULFILL THEIR RESPECTIVE FIDUCIARY OBLIGATIONS TO THE LADIES PROFESSIONAL GOLF ASSOCIATION IN THE EVENT THAT A CONFLICT OF INTEREST OR ETHICAL ISSUE CANNOT BE SATISFACTORILY RESOLVED BY THE CORPORATE SECRETARY AND THE GENERAL COUNSEL, THE MATTER SHALL BE REFERRED BY EITHER OF THEM TO THE LADIES PROFESSIONAL GOLF ASSOCIATION HR/LEGAL 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

Identifier	Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	FORM 990, PART VI, LINE 15A	THE HR/LEGAL COMMITTEE OF THE BOARD OF DIRECTORS IS CHARGED WITH RECOMMENDING THE COMPENSATION OF THE COMMISSIONER TO THE LADIES PROFESSIONAL GOLF ASSOCIATION BOARD OF DIRECTORS FOR APPROVAL. THIS RECOMMENDATION IS DETERMINED ANNUALLY BASED ON INFORMATION RECEIVED THROUGH INDEPENDENT COMPENSATION CONSULTING, COMPARABLE INDUSTRY KNOWLEDGE, AND/OR MARKET SURVEYS. IN ADDITION, THE HR/LEGAL COMMITTEE DEVELOPS AND RECOMMENDS TO THE ENTIRE BOARD OF DIRECTORS THE COMMISSIONER'S ANNUAL PERFORMANCE BONUS, IF CERTAIN OBJECTIVES ARE MET.

Identifier	Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	FORM 990, PART VI, LINE 15B	THE COMMISSIONER IS CHARGED WITH CONDUCTING PERFORMANCE REVIEWS OF OFFICERS AND KEY EMPLOYEES TO DETERMINE BASE SALARY , BENEFITS AND PERFORMANCE BONUS, IF OBJECTIVES ARE MET THIS COMPENSATION IS DETERMINED BASED ON INFORMATION RECEIVED THROUGH INDEPENDENT COMPENSATION CONSULTING, COMPARABLE INDUSTRY KNOWLEDGE, AND/OR MARKET SURVEYS

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 18	LADIES PROFESSIONAL GOLF ASSOCIATION MAKES ITS FORMS 1023, 990, 990-T	AVAILABLE FOR PUBLIC INSPECTION VIA U S MAIL UPON REQUEST

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	NO GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY OR FINANCIAL	STATEMENTS ARE AVAILABLE TO THE PUBLIC

Identifier	Return Reference	Explanation
BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS	SCH L, PART IV	(A) NAME OF PERSON MICHELLE ELLIS (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION \$ 10,000 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN MICHELLE ELLIS AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO A STIPEND RECEIVED FOR SERVICES AS LPGA TOUR PRESIDENT (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON STACY P LLC (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION \$ 139,107 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN STACY P, LLC AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PRIZE WINNINGS RECEIVED FROM COMPETING IN LPGA TOURNAMENTS (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON AYRWAVES INC (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION \$ 511,543 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN AYRWAVES INC AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PRIZE WINNINGS RECEIVED FROM COMPETING IN LPGA TOURNAMENTS (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON HELEN ALFREDSSON (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION \$ 2,400 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN HELEN ALFREDSSON AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PRIZE WINNINGS RECEIVED FROM COMPTETING IN LPGA TOURNAMENTS (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON ALLISON FOUCH (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION \$ 19,427 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN ALLISON FOUCH AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PRIZE WINNINGS RECEIVED FROM COMPETING IN LPGA TOURNAMENTS (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON KMF GROUP, LLC (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION \$ 375,888 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN KMF GROUP LLC AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PRIZE WINNINGS RECEIVED FROM COMPETING IN LPGA TOURNAMENTS (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON DANA RADER (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION \$ 11,000 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN DANA RADER AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO A STIPEND RECEIVED FOR SERVICES AS TCP NATIONAL PRESIDENT AND EVALUATOR (E) SHARING OF ORGANIZATION REVENUES? = NO

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ 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.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
Ladies Professional Golf Association

Employer identification number
75-0055465

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

(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
(1) FGTA LLC 100 International Golf Drive Daytona Beach, FL 32124 26-0507044	Develop Tour	FL	143,156	4,670,498	NA
(2) LPGA Tourm Prop One LLC 100 International Golf Drive Daytona Beach, FL 32124 27-1317091	Golf Events	FL	-161,588	4,743,422	LPGA

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 organization	
						Yes	No
(1) THE LPGA FOUNDATION 100 International Golf Drive Daytona Beach, FL 32124 59-3085528	JRGOLF/SCHOL	FL	501(c)(3)	II Type II	NA		
(2) Daytona Beach Golf Charities 100 International Golf Drive Daytona Beach, FL 32124 59-3214096	Golf Events	FL	501(C)(3)	N/A	NA		

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

Part V

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

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

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 (iv) rent from a controlled entity

b

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

c

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

d

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

e

Loans or loan guarantees by related organization(s)

f

Sale of assets to related organization(s)

g

Purchase of assets from related organization(s)

h

Exchange of assets with related organization(s)

i

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

j

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

k

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

l

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

m

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

n

Sharing of paid employees with related organization(s)

o

Reimbursement paid to related organization(s) for expenses

p

Reimbursement paid by related organization(s) for expenses

q

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

r

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

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

Yes

Yes

No

Yes

No

No

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2011

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

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

Identifier	Return Reference	Explanation	
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Additional Data

Software ID:
Software Version:
EIN: 75-0055465
Name: Ladies Professional Golf Association

Form 990, Special Condition Description:

Special Condition Description
