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Form 990

Return of Organization Exempt From Income Tax

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

2013

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

Open to Public Inspection

A FOR	the 2013 calendar year, or tax year beginning	and	enaing	_			
B Chec appli	crif C Name of organization		· 	D Employer ide	ntificati	on number	
Ac	dress GEORGIA SECTION PGA OF AM	IERICA, INC.		1			
N	me ange Doing Business As			58	-108	9016	
In re	Number and street (or P 0 box if mail is not delivered	to street address)	Room/suite	E Telephone nu			
at		O. 204		67	8-46	1-8600	
lre	City or town, state or province, country, and ZIP o	r foreign postal code		G Gross receipts \$		1,786,	815
	ROSWELL, GA 30075			H(a) Is this a gro	up returr		
	F Name and address of principal officer:M1CHAL	L PAULL		for subordin		Yes	
	SAME AS C ABOVE	<u> </u>		H(b) Are all subordin			No
		nsert no) 4947(a)(1)	or 527			(see instruction	ns)
	site: N/A			H(c) Group exen			. 0
Part	of organization X Corporation Trust Associate Summary	ion Other ▶	L Year	of formation 196	9 M Sta	ate of legal domi	cile G2
	<u> </u>	ficant activities: SEE	SCHEDU	ILE O			
<u> </u>	briefly describe the organization's mission of most signi	ilicant activities. DIII	Веньв				
<u> </u>	Check this box if the organization discontinue	ed its operations or dispo	sed of more	than 25% of its n	et asset:	 S.	
3					3		1:
4	Number of independent voting members of the governir				4		1:
	Total number of individuals employed in calendar year 2				5		- 1
6	Total number of volunteers (estimate if necessary)	,			6		5(
	a Total unrelated business revenue from Part VIII, column	(C), line 12			7a	8,	575
`	b Net unrelated business taxable income from Form 990-1				7b		0
				Prior Year		Current Yea	
	Contributions and grants (Part VIII, line 1h)				0.		0.
9	Program service revenue (Part VIII, line 2g)			1,681,98		1,772,	
10	Investment income (Part VIII, column (A), lines 3, 4, and	7d)		39,66 9,52			902 575
1		er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					
1:	Total revenue - add lines 8 through 11 (must equal Part	VIH column (A), Ine 12)		1,731,180. 1,786,8			
1:	(11)			1,50		3,	366
1.	Benefits paid to or for members (Part IX, column (A)Nine	M)0 4 2014 8			0.		0
1:	(X, column (A), lines 5110)		364,30		346,	
11	a Professional fundraising fees (Part IX, column (A), fine 1	()			0.		0
	b Total fundraising expenses (Part IX, column (D), line 25P		0.				
1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-2			1,431,94		1,388,	
10	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	lumn (A), line 25)		1,797,75		1,738,	
<u>1</u>	Revenue less expenses. Subtract line 18 from line 12			<66,57		· 	379
<u> </u>	. T. I		Be	ginning of Current Y		End of Yea	
를 2			-	1,000,34		1,097,	
Fund Balances	, , , , , , , , , , , , , , , , , , , ,		<u> </u>	265,51		260,	
	Net assets or fund balances. Subtract line 21 from line 2 Signature Block	20	<u> </u>	734,82	9 •	837,	0/0
	enalties of perjury, I declare that I have examined this return, include	tina socompanyina cohodula	c and statem	ento and to the best	of my kn	ouledge and hal	of it is
	rect, and complete Declaration of expeparer (other than officer) is b				Of Hily Kill	owieuge allu bei	iei, it is
10, 00	Clase A. In	vasea sit ally illiottilation of wi	iicii piepaiei	lias any knowledge			
gn	Signature of officer		-	Date	/ /		
ere	MICHAEL PAULL, EXEC. DIRE	CTOR		10/	28/1	4	
	Type or print name and title					<u>•</u>	
	Print/Type preparer's name Prep	arer's signature		Date Che	ck	PTIN	
iid	- 3, - 1, - 1, - 1, - 1, - 1, - 1, - 1,			if celf-	employed		
epare	Firm's name	 		Firm's EIN			 -
se Oni							
				Phone no			
lay th	IRS discuss this return with the preparer shown above?	see instructions)				Yes [No

	rt 腓 Statement of Program Service Accomplishments									
	Check if Schedule O contains a response or note to any line in this Part III									
1	Briefly describe the organization's mission:									
	SEE SCHEDULE O									
2	Did the organization undertake any significant program services during the year which were not listed on									
	the prior Form 990 or 990-EZ?									
	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 X No									
	If "Yes," describe these changes on Schedule O.									
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.									
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and									
	revenue, if any, for each program service reported.									
4a	(Code) (Expenses \$ including grants of \$) (Revenue \$) TOURNAMENTS. AC DARW OF CHORGA CHORGAN COLORS MICCION TO PROMOTE THE CAME									
	TOURNAMENTS: AS PART OF GEORGIA SECTIONS MISSION TO PROMOTE THE GAME									
	OF GOLF, WE CONDUCTED OVER ONE HUNDRED GOLF TOURNAMENTS THIS YEAR WITH									
	THOUSANDS OF PARTICIPANTS THROUGH THE STATE OF GEORGIA, INCLUDING THE GEORGIA OPEN, THE GEORGIA SENIOR OPEN, AND GEORGIA WOMEN'S OPEN.									
	GEORGIA OPEN, THE GEORGIA SENIOR OPEN, AND GEORGIA WOMEN'S OPEN.									
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)									
	Code) (Expenses \$									
	PROFESSIONALS ARE EXPERT INSTRUCTORS AND COMMUNITY LEADERS WHO HELP									
	PROVIDE AFFORDABLE AND ACCESSIBLE GOLF TO EVERYONE, EVERYWHERE WITHIN									
	THE STATE OF GEORGIA. GEORGIA SECTION PROVIDES EDUCATIONAL PROGRAMS TO									
	ENSURE THAT GOLF PROFESSIONALS WILL REMAIN AT THE FOREFRONT OF THE GAME									
	PROVIDING ENJOYMENT TO MANY FOR GENERATIONS TO COME.									
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)									
4d	Other program services (Describe in Schedule O.)									
	(Expenses \$ including grants of \$) (Revenue \$)									
<u>4e</u>	Total program service expenses ►									
	E 000 (0040)									

			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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	1		
	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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	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	11c		X
d				
	Part X, line 16 ⁷ If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	-	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	_16_	ļ	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	ļ	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			,,
46	1c and 8a? If "Yes," complete Schedule G, Part II	18	ļ	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes,"			1,
00	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990	(00:5
		Lorm	- wwiii	C 21 17 '4'

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GEORGIA SECTION PGA OF AMERICA, INC. Part IV Checklist of Required Schedules (continued)

	Duty the second of the second		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	04		v
^^	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or 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		Х
23				
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		х
94a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	-25		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	_	
	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		
	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		
ь	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	ļ		1
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			ĺ
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	ļ		ļ
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			.,,
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	<u></u>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	_29_		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
04	contributions? If "Yes," complete Schedule M	30_		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
20	If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	22	Ì	х
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		 ^
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	1	x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
•	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	1000		
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	L
		Form	990	(2013

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b0	1 1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1 1		1
_	(gambling) winnings to prize winners?	10	X	ĺ
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	,		
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	X	
	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	l	Х
ь	· · · · · · · · · · · · · · · · · · ·			
	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	Ì	Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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 as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6ь]	
7	Organizations that may receive deductible contributions under section 170(c).			
а	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	Ī	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			\Box
	to file Form 8282?	7c	<u> </u>	
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u></u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		L
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u></u>
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		<u> </u>
9	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		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	4		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter:	-		
а	Gross income from members or shareholders	4		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
	amounts due or received from them.)		ŀ	1
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	<u> </u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		 -
_	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			1
	organization is licensed to issue qualified health plans	4		
	Enter the amount of reserves on hand	1		x
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	├─	 ^
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	, <u>aan</u>	(2013)
		FUIL	1 220	(2013)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X					
<u>Sec</u>	tion A. Governing Body and Management								
	1 1		Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 15								
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O								
_	Enter the number of voting members included in line 1a, above, who are independent 15								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		-						
_	officer, director, trustee, or key employee?	2		_X_					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision		'	. .					
	of officers, directors, or trustees, or key employees to a management company or other person?	4		X					
4									
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5 6	X	<u>X</u> _					
6 7a	Did the organization have members or stockholders?	-							
10	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?	70	Х	<u> </u>					
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a		 					
U	persons other than the governing body?	7b	Х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	7.5							
а	The governing body?	8a	X	ĺ					
b	Each committee with authority to act on behalf of the governing body?	8b	<u> </u>						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		_=						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a	X	Ĺ					
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	<u>X</u>						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X						
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b							
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							
13	Did the organization have a written whistleblower policy?	13		X					
14	Did the organization have a written document retention and destruction policy?	14	-	X					
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?	45-	X	1					
a	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	15a	<u> </u>	X					
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b		<u> </u>					
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		Х					
ь	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		1					
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	le						
	for public inspection Indicate how you made these available. Check all that apply								
	Own website Another's website X Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d fınar	icial						
	statements available to the public during the tax year.								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who person of the person of the person who person of the pe	tion: 🕨							
	THE GEORGIA SECTION CONTROLLER - 561.624.8400								
	300 AVE OF CHAMPIONS #205, PALM BCH GARDENS, FL 33418								

Form 990 (2013) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

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

(A) Name and Title	(B) Average hours per week	box offi	not c , unle	ss pe	nore	than is bot or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) MIKE BAKER	1.00										
CENTRAL CHP PRESIDENT	1 00	X	_				_	0.	0.	0	
(2) JEFF DUNOVANT	1.00	37								0	
DIRECTOR	1.00	X	-			ļ		0.	0.	0	
(3) WINSTON TRIVELY CENTRAL CHP SEC/TRES	1.00	X						0.	0.	0	
(4) JOSH WILLIAMS	1.00	_						0.		0	
EAST CHP PRES/SEC/TRES	1.00	X						0.	0.	0	
(5) JEFF FRASIER	1.00							•		•	
NORTH CHP PRES/SEC/TRES	2000	X						0.	0.	0	
(6) SCOTT MAHR	1.00										
DIRECTOR		X						0.	0.	0	
(7) JOHN GODWIN	1.00										
DIRECTOR		X						0.	0.	0	
(8) STEVE BARFOOT	1.00									•	
DIRECTOR		X			L.,			0.	0.	0	
(9) MICHAEL RAYMOND	2.00										
DIRECTOR		X				_		0.	0.	0	
(10) PATRICK RICHARDSON	2.00			ŀ					_	_	
HONORARY PRESIDENT	0.00	Х				_		0.	0.	0	
(11) BRIAN ALBERTSON	2.00	ļ		١						_	
SECRETARY/TREASUER	2 00			Х		-		0.	0.	0	
(12) MARK MONGELL	2.00	1		X					_	^	
VICE PRESIDENT	60.00		-	^	-			0.	0.	0	
(13) MICHAEL PAULL EXECUTIVE DIRECTOR	00.00	ł		X	ĺ			89,540.	0.	23,531	
(14) BRIAN STUBBS	2.00			Λ		 	-	07,340.		23,331	
PRESIDENT	2:00			Х				0.	0.	0	
				<u> </u>		_					
			-	_		-				•	
		1			1						

	4 - 47 Section A. Onicers, Directors, Trus	iees, key Em	picy	ees	, an	<u>u ni</u>	gne	SIL	zompensated Employe	es (continuea)				
•	(A) Name and title	(B) Average	(50		Pos		i tnan	one	(D) Reportable	(E) Reportable		Es	(F) timate	ed
		hours per week	offi	, unle	ss pe	rson	is bot or/trus	h an	compensation from	compensatior from related	۱		ount other	of
		(list any hours for	or director				pa		the organization	organizations (W-2/1099-MIS			oensa om the	
		related organizations	trustee	al trustee		88	unbeusa		(W-2/1099-MISC)			-	anızatı İ relat	
		below line)	Individual trustee or	Institutional	Officer	Key employee	Highest compensated employee	Former					nızatı	
			゠	_=	8	જ	± ₽	5				_		
			<u> </u>					ļ	_	***************************************				
-							ļ	-	,					
								_						
		,												
											7.			
									-					
								<u> </u>						
													_	
	Sub-total Total from continuation sheets to Part VI	I Castian A							89,540.		0.	2	3,5	$\frac{31.}{0.}$
	Total (add lines 1b and 1c)	i, Section A							89,540.		0.	2	3,5	
2	Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	ed al	bove	e) wl	no r	eceived more than \$100	,000 of reportable				0
	compensation from the organization												Yes	No
3	Did the organization list any former officer,			e, ke	ey er	nplo	yee	, or	highest compensated e	mployee on				v
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su			amo	ensa	ation	n and	d ot	her compensation from	the organization	}	3		Х
_	and related organizations greater than \$150	0,000? <i>If</i> "Yes,	" co	mple	ete S	Sche	edule	e J i	for such individual	_		4		Х
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com							elat	ted organization or indivi	idual for services		5		х
Sect	tion B. Independent Contractors			<u> </u>										
1	Complete this table for your five highest co the organization. Report compensation for										pensa	ation fi	rom	
	(A)		cai v	<u> silui</u>	ng v	VILII	OI W	101111	(B)	year.		(C	:)	
PCZ	Name and business A TOUR INC., 112 PGA TO			DC	אזר	ישיח			Description of s	ervices	C	omper	satio	n
	PRA BEACH, FL 32082	JOK BLVI	,	P) IV .	LC			PGA TOUR SER	VICES		15:	2,3	40.
								•						
														
2	Total number of independent contractors (i	ncluding but n	ot lii	mıte	d to	tho	se lis	stec	d above) who received m	nore than				
—	\$100,000 of compensation from the organi	zation 🕨					1	_				Form 9	200 "	2012

		Check if Schedule O conf	tains a response	or note to any lu	ne in this Part VIII			
				<u> </u>	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts	1 :	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	ļ	Membership dues	1b]		•	
S, ((Fundraising events	1c					
Giff	(d Related organizations	1d					
ns,	•	e Government grants (contribut	tions) 1e]			
er S	1	f All other contributions, gifts, gran	nts, and					
章美		similar amounts not included abo	ove 1f					
d d	•	Noncash contributions included in lines	s 1a-1f \$					
<u>ठ</u> ह		n Total. Add lines 1a-1f			<u></u>		·····	
	[Business Code				
8	2 8				1,074,614.	1,074,614.		
Program Service Revenue	l	SPONSORSHIP REV		900099	281,415.			281,415.
n Si	۱ ،	MEMBERSHIP DUES	<u> </u>	900099	277,844.			
Fan Sev	•	ADP FUNDING		900099	128,508.			
5	•	REGISTRATION IN	ICOME	900099	7,140.	7,140.		
<u>α</u>	1	f All other program service reve	enue					
		Total. Add lines 2a-2f			1,769,521.	_		
	3	Investment income (including	dividends, intere	est, and				i
		other sımılar amounts)		>	5,902.			5,902.
	4	Income from investment of ta	x-exempt bond p	proceeds				
	5	Royalties		<u> </u>	2,817.			2,817.
			(i) Real	(II) Personal	1			
	6 6		<u> </u>		1			
	1	Less: rental expenses		ļ.—.	-			
	•	Rental income or (loss)		L				
		d Net rental income or (loss)		<u> </u>				ļ
	7 8	Gross amount from sales of	(i) Securities	(II) Other	1			
		assets other than inventory			_			
	t	Less. cost or other basis						
		and sales expenses		ļ	<u> </u>			
		Gain or (loss)		l				
	_	Net gain or (loss)						
enne	8 8	Gross income from fundraisin including \$	g events (not of					
Rev		contributions reported on line	tc) See					
Other Reven		Part IV, line 18	а					
듐	t	Less: direct expenses	b		-			
		Net income or (loss) from fund	_					
	9 a	Gross income from gaming ac	ctivities See					
		Part IV, line 19	а					
	ŀ	Less: direct expenses	b					
	•	Net income or (loss) from gam	ning activities					
	10 a	Gross sales of inventory, less	returns					
į		and allowances	a					
	t	Less: cost of goods sold	b	<u></u>				
ĺ		Net income or (loss) from sale	s of inventory	<u> </u>				
		Miscellaneous Revenu	ie	Business Code				
	11 a	ADVERTISING		541800	8,575.		8,575.	
}	t	·						
	•							
{		All other revenue		L	0.555			ļ
		Total. Add lines 11a-11d		•	8,575.	1 400 105		
	12	Total revenue. See instructions			1,786,815.	L,488,106.	8,575.	290,134.

Form 990 (2013) GEORGIA SECTION Part IX Statement of Functional Expenses

Secti-	on 501(c)(3) and 501(c)(4) organizations must comp			ompiete column (A)	
	Check if Schedule O contains a respons			(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21	3,366.			
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members		· 		
5	Compensation of current officers, directors,	112 271			
	trustees, and key employees	113,071.	· · ·		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	164 225			
7	Other salaries and wages	164,325.			
8	Pension plan accruals and contributions (include	1 200			
_	section 401(k) and 403(b) employer contributions)	1,200. 47,616.			
9	Other employee benefits	20,334.			· · · · · · · · · · · · · · · · · · ·
10	Payroll taxes	20,334.			
11	Fees for services (non-employees):				
a	Management				
b	Legal				
d	Accounting Lobbying				
u	Professional fundraising services See Part IV, line 17			, , , , , , , , , , , , , , , , , , , ,	
f	Investment management fees				
a.	Other. (If line 11g amount exceeds 10% of line 25,			 	
9	column (A) amount, list line 11g expenses on Sch O	7,200.			
12	Advertising and promotion	7,200. 18,616.			
13	Office expenses	15,741.			
14	Information technology				
15	Royalties				
16	Occupancy	12,446.			· · ·
17	Travel	163,947.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	828.			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	27,315.			
23	Insurance	16,219.			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O')	F10 0F0			
a	TOURNAMENT PRIZES	519,959.		<u> </u>	
b	TOURNAMENT OPERATIONS	468,164.		 	
c	PROCESSING FEES FOOD & BEVERAGE	43,814. 36,576.	.,		
d		57,699.		 	
e OF	All other expenses	1,738,436.			
25	Total functional expenses. Add lines 1 through 24e	1,730,430.			
.26	Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here fifther if following SOP 98-2 (ASC 958-720)				
	1 In injurying 50P 98-2 [ASC 938-720]				

Form 990 (2013)
Part X Balance Sheet

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			18,081.	1	44,949 78,072
	2	Savings and temporary cash investments		Ī	112,080.	2	78,072
	3	Pledges and grants receivable, net		Ī		3	
	4	Accounts receivable, net			67,544.	4	105,483
- 1	5	Loans and other receivables from current and for	•				
		trustees, key employees, and highest compensa		· · · · · · · · · · · · · · · · · · ·			
		Part II of Schedule L	3100 011	ipioyecui compiete		5	
ł	6	Loans and other receivables from other disquali	fied ne	rsons (as defined under		J	
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of section					
,		employees' beneficiary organizations (see instr).			6		
	7	Notes and loans receivable, net	lete rait ii oi oon L	257,999.	7	257,996	
!	8	Inventories for sale or use		-		8	
	9	Prepaid expenses and deferred charges		-	3,592.	9	3,245
		Land, buildings, and equipment cost or other	1 1		3,0520	•	5/210
		basis. Complete Part VI of Schedule D	10a	638,920.			
	h	Less: accumulated depreciation	10b	330,010.	336,225.	10c	308,910
	11	Investments - publicly traded securities	100	330,010.	203,820.	11	298,200
	12	Investments - other securities. See Part IV, line	11			12	230,200
	13	Investments - other securities. See Part IV, line		13			
	14	Intangible assets	_	14			
	15	Other assets. See Part IV, line 11		1,000.	15	1,000	
	16	Total assets. Add lines 1 through 15 (must equ	1,000,341.	16	1.097.855		
7	17	Accounts payable and accrued expenses	93,985.	17	1,097,855 91,137		
	18	Grants payable		18	31,10,		
	19	Deferred revenue	146,763.	19	152,704		
	20	Tax-exempt bond liabilities			20	1327,01	
	21	Escrow or custodial account liability Complete	Dort IV	of Sobodulo D		21	
,	22	Loans and other payables to current and former		Į.	_		
		key employees, highest compensated employee		i i			
		Complete Part II of Schedule L	ss, and	disqualified persons.		22	
i	23	Secured mortgages and notes payable to unrela	atad th	rd parties	24,764.	23	16,338
	24	Unsecured notes and loans payable to unrelate		'		24	10,000
	25	Other liabilities (including federal income tax, pa			·		
	20	parties, and other liabilities not included on lines					
		Schedule D	5 11-24	7. Complete Fait A of		25	
	26	Total liabilities. Add lines 17 through 25			265,512.	26	260,179
		Organizations that follow SFAS 117 (ASC 958	3) char	k here 🕨 🔲 and			
,		complete lines 27 through 29, and lines 33 ar					
3	27	Unrestricted net assets	IG 04.			27	
į	28	Temporarily restricted net assets			_	28	
	29	Permanently restricted net assets			-	29	
		Organizations that do not follow SFAS 117 (A	SC 05	B), check here ► X	••		
		and complete lines 30 through 34.	.00 95	oj, check here P [11]			
	30				0.	30] (
}	31	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or ed	15,219.	31	15,219		
	32	Retained earnings, endowment, accumulated in			719,610.	32	822,457
	عد	<u>-</u>	iconie,	OLOUIGI IOIIOS	724 000		837,676
ret Assets of Fully Dalalices	33	Total net assets or fund balances		l	734,829.	33	83/an/n

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

OMB No 1545-0047

Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organiza	itions: Complete Part III.	.,		
Nan	ne of organization			Emple	oyer identification number
	GEORGIA GEORGIA	SECTION PGA OF	AMERICA, IN	IC.	58-1089016
Pa	art I-A Complete if the or	ganization is exempt und	der section 501(c	or is a section 527 or	rganization.
2	Provide a description of the organized Political expenditures Volunteer hours	zation's direct and indirect politic	cal campaign activities	ın Part IV. ▶\$	
Pa	art I-B Complete if the ord	ganization is exempt und	der section 501(c)(3).	
	Enter the amount of any excise tax			▶ \$	
	Enter the amount of any excise tax	• •		5 ▶ \$	
	If the organization incurred a section			·	Yes No
	a Was a correction made?		•		Yes No
	lf "Yes," describe in Part IV				
Pá	ert I-C Complete if the or	ganization is exempt und	der section 501(c), except section 501(c)(3).
1	Enter the amount directly expende	d by the filing organization for se	ection 527 exempt fund	ction activities >\$	
2	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for s	section 527	
	exempt function activities			▶\$	
3	Total exempt function expenditures	s Add lines 1 and 2. Enter here a	and on Form 1120-PO	L ,	
	line 17b			▶\$	
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses and en	mployer identification number (E	IN) of all section 527 p	olitical organizations to whic	h the filing organization
	made payments. For each organiza	•	~ ~		•
	contributions received that were pr				te segregated fund or a
	political action committee (PAC). If	additional space is needed, pro	vide information in Par	t IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2013

332041 11-08-13

LHA

Schedule C (Form 990 or 990-EZ) 2013 GEOR				NC. 58-1	1089016 Page 2
Part II-A Complete if the organizat		mpt under sectio	n 501(c)(3) and file	ed Form 5768	
(election under section 50			=		 -
A Check ► ☐ If the filing organization below			Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and share of exc		• •			
B Check If the filing organization che	cked box A a	nd "limited control" pro	ovisions apply.		
Limits on Lo (The term "expenditures")	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to influence pu	iblic opinion ((grass roots lobbying)		-	
b Total lobbying expenditures to influence a					
c Total lobbying expenditures (add lines 1a a					
d Other exempt purpose expenditures	•			-	
e Total exempt purpose expenditures (add lii	nes 1c and 1d	4)			
f Lobbying nontaxable amount. Enter the an			h columns		
If the amount on line 1e, column (a) or (b) is:		bying nontaxable am		,,	
Not over \$500,000		the amount on line 1e	ount is.		
		00 plus 15% of the exc			
Over \$500,000 but not over \$1,000,000	ess over \$500,000.				
Over \$1,000,000 but not over \$1,500,000					
Over \$1,500,000 but not over \$17,000,000	ss over \$1,500,000.				
Over \$17,000,000	\$1,000,	000			
					1
g Grassroots nontaxable amount (enter 25%	-				
h Subtract line 1g from line 1a. If zero or less	, enter -0-			<u>.</u> .	
 Subtract line 1f from line 1c If zero or less, 					<u> </u>
j If there is an amount other than zero on eit	ner line 1h or	line 11, did the organiz	ation file Form 4720		
reporting section 4911 tax for this year?					Yes No
	hat made a s elow. See th	e instructions for line	n do not have to comp es 2a through 2f on pa		
Lo	bbying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount	· ·				
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2013

(b)

(a)

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

the lobbying activity.			(b	<u></u>
	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
art III-A Complete if the organization is exempt under section 501(c)(4), sec	tion 501(c	:)(5), or se	ction	
501(c)(6).		-		
		,	Yes	No
Were substantially all (90% or more) dues received nondeductible by members?		1		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	
A A A A A A A A A A A A A A A A A A A		<u> </u>	Λ	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		X
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sec		3 :)(5), or se	ction	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered.		3 :)(5), or se	ction	
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Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members	ed "No," C	3 (5), or se (b) Part	ction	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of po	ed "No," C	3 (5), or se (b) Part	ction	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).	ed "No," C	3 c)(5), or se PR (b) Part	ction	
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Did the organization agree to carry over lobbying and political expenditures from the prior year? Interpretation Complete Interpretation Source	ed "No," C	3 3(5), or se PR (b) Part 1 2a 2b 2c 3	ction	ne 3, is
Did the organization agree to carry over lobbying and political expenditures from the prior year? Tart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	ed "No," C	3 3(5), or se PR (b) Part 1 2a 2b 2c 3	ction	ne 3, is
Did the organization agree to carry over lobbying and political expenditures from the prior year? Interpretation Complete Interpretation Source	ed "No," C	3 3(5), or se PR (b) Part 1 2a 2b 2c 3	ction	ne 3, is
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Did the organization agree to carry over lobbying and political expenditures from the prior year? Interpretation Complete Interpretation Source	ed "No," C	3 3(5), or se PR (b) Part 1 2a 2b 2c 3	ction	ne 3, is

Schedule C (Form 990 or 990-EZ) 2013

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, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

GEORGIA SECTION PGA OF AMERICA, INC.

Employer identification number 58-1089016

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(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		Yes No
6	Did the organization inform all grantees, donors, and donor a	<u> </u>	ed only
	for charitable purposes and not for the benefit of the donor of	-	
	impermissible private benefit?		Yes No
Pai		ganization answered "Yes" to Form 990, Part	
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e		ically important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	a conservation easement on the last
	day of the tax year		
	,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	` '	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the or	ganization during the tax
	year▶	,	•
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements during	ng the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and		-
8	Does each conservation easement reported on line 2(d) above	-	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense sta	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza		
	conservation easements.		
Par	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Othe	er 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 (AS	SC 958), not to report in its revenue statemen	nt and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherance	e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ibes these items.	
ь	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement an	nd balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	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 tre	easures, or other similar assets for financial da	
	the following amounts required to be reported under SFAS 1	•	• • · · · · · · · ·
а	Revenues included in Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		> \$
			·

Part X					_
MAIT A	Other	1 12	ını	HTIE	, ,

l .	(a) Description of liability	(b) Book value
(1) Federal incom	e taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) mu	st equal Form 990, Part X, col. (B) line 25.)	

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

GEORGIA SECTION PGA OF AMERICA, INC.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

Open to Public

OMB No 1545-0047

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

Inspection

Name of the organization GEORGIA SECTION PGA OF AMERICA, INC.	Employer identification number 58-1089016							
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:							
TO PROMOTE THE ENJOYMENT & INVOLVEMENT IN THE GAME OF GOL	F AND TO							
CONTRIBUTE TO THE GROWTH OF THE GOLF PROFESSIONAL AND THE	GOLF							
INDUSTRY. THE GEORGIA SECTION WILL ACCOMPLISH THIS MISSI	ON BY							
ENHANCING THE SKILLS OF THE GOLF PROFESSIONALS AND PROMOT	ING THE							
OPPORTUNITIES FOR AMATEURS, MANUFACTURERS AND THE GENERAL PUBLIC. AS A								
RESULT, THE GEORGIA SECTION WILL ELEVATE THE STANDARDS OF THE								
PROFESSIONAL GOLFERS VOCATION, STIMULATE INTEREST IN THE GAME OF GOLF,								
AND PROMOTE THE OVERALL VITALITY OF THE GAME.								
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION M	ISSION:							
TO PROMOTE THE ENJOYMENT & INVOLVEMENT IN THE GAME OF GOL	F AND TO							
CONTRIBUTE TO THE GROWTH OF THE GOLF PROFESSIONAL AND THE	GOLF							
INDUSTRY. THE GEORGIA SECTION WILL ACCOMPLISH THIS MISSI	ON BY							
ENHANCING THE SKILLS OF THE GOLF PROFESSIONALS AND PROMOT	ING THE							
OPPORTUNITIES FOR AMATEURS, MANUFACTURERS AND THE GENERAL	PUBLIC. AS A							
RESULT, THE GEORGIA SECTION WILL ELEVATE THE STANDARDS OF	THE							
PROFESSIONAL GOLFERS VOCATION, STIMULATE INTEREST IN THE	GAME OF GOLF,							
AND PROMOTE THE OVERALL VITALITY OF THE GAME.								
FORM 990, PART VI, SECTION A, LINE 6:								
EXPLANATION: NOT FOR PROFIT CORPORATION WITH MEMBERS								
FORM 990, PART VI, SECTION A, LINE 7A:								
EXPLANATION: THE ORGANIZATION'S MEMBERS VOTE IN ELECTIONS	AT ANNUAL							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

MEETINGS.

Name of the organization GEORGIA SECTION PGA OF AMERICA, INC.	Employer identification number 58-1089016
	30 1003010
FORM 990, PART VI, SECTION A, LINE 7B:	
EXPLANATION: ANY CHANGES TO THE BYLAWS MUST BE APPROVED B	Y A TWO-THIRDS
MAJORITY OF MEMBERS AT THE ANNUAL MEETING.	
FORM 990, PART VI, SECTION B, LINE 11:	
EXPLANATION: A COPY OF FORM 990 WAS PROVIDED TO THE ORGAN	IZATION'S
GOVERNING BODY BEFORE IT WAS FILED. MICHAEL PAULL, EXECU	TIVE DIRECTOR,
REVIEWS THE 990 PRIOR TO FILING IT WITH THE IRS.	
FORM 990, PART VI, SECTION B, LINE 15A:	
EXPLANATION: COMPENSATION PAID TO THE EXECUTIVE DIRECTOR	IS NEGOTIATED WITH
THE OFFICERS OF THE SECTION USING A NATIONAL SURVEY OF CO	MPARABLE
COMPENSATION. THE EXECUTIVE DIRECTOR HAS A WRITTEN EMPLO	YMENT CONTRACT.
NO OTHER OFFICERS OR DIRECTORS ARE COMPENSATED.	
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: THE ORGANIZATION MAKES THE GOVERNING DOCUMEN	TS AND FINANCIAL
STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.	
	

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Part

Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 890, Part IV, line 33, 34, 35b, 36, or 37.

➤ Attach to Form 990. ► See separat

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

GEORGIA SECTION PGA OF AMERICA,

► See separate instructions.

2013 2013

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

Open to Public Inspection
Employer identification number 58–1089016

(g) Section 512(b)(13) Schedule R (Form 990) 2013 Ŷ controlled entity? Direct controlling Yes 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. Direct controlling entity End-of-year assets status (if section Public charity 501(c)(3)) **e** Total income Exempt Code ፱ section চ Legal domicile (state or foreign country) Legal domicile (state or foreign country) Primary activity Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity Part #

58-1089016

Page 2

INC. GEORGIA SECTION PGA OF AMERICA, Schedule R (Form 990) 2013

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. Part III

(a)	(q)	9	9	(e)	8	(6)	3	6	6	3
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Shar	Share of end-of-year assets	Disproportionate allocations? Yes No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	General or Percentage managing ownership partner?
							_			
								! 		
									_	

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. Part IV

							Ī	
(a)	(9)	9	9	(e)	€	(6)	Ξ	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	512(b)(13) controlled entity?
GEORGIA PGA CORPORATION - 58-1984826 590 W CROSSVILLE RD #204 ROSWELL GA 30075	INACTIVE	GA	N/A	C CORP			100.00%	×
332162 09-12-13		23				Sche	Schedule R (Form 990) 2013	990) 2013

58-1089016 Page 3.

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

Note. Complete line 1 if any entity is listed in Parts II III or IV of this schedule					\vdash	
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?	ns with one or more i	related organizations listed	d in Parts II-IV?		200	•
a Receipt of (i) interest (ii) annutties (iii) royalties or (iv) rent from a controlled entity		•		-E	×	
b Gift, grant, or capital contribution to related organization(s)				9	×	
c Gift, grant, or capital contribution from related organization(s)				5	×	
d Loans or loan guarantees to or for related organization(s)				무	×	
e Loans or loan guarantees by related organization(s)				- 1	×	
* Dividends from to late a second additional of				;	>	
				=	<	
				1	×	
h Purchase of assets from related organization(s)				두	×	
i Exchange of assets with related organization(s)				1:	×	
j Lease of facilities, equipment, or other assets to related organization(s)				ĵ,	×	
k Lease of facilities, equipment, or other assets from related organization(s)				*	×	
l Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=	×	
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			٤	×	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			Ę	×	
o Sharing of paid employees with related organization(s)				9	×	
					••••	
p Reimbursement paid to related organization(s) for expenses				1	×	
 Reimbursement paid by related organization(s) for expenses 				1	×	
 Other transfer of cash or property to related organization(s) 				-	×	
				18	×	
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.	who must complete t	his line, including covered	relationships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	nvolved		
(1)						
(2)						
(3)					:	
(4)						
(5)						
•					i	
[0]	100					
332163 09-12-13	57		Schedule	Schedule R (Form 990) 2013	0) 2013	

Page 4

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

			sdii biland allama						
(e)	<u>.</u>	(0)	(a)			Ē	3 3 3	3	(
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income parners sec (related, unrelated, 50(e)(3) excluded from tax outs?	Share of total total Income	Share of end-of-year assets	Dispropor- tonate allocations?	Dispropor Code V-UBI General or Percentage bonts amount in box 20 managing ownership of Schedule K-I partner? Ownership of Schedule K-I	General or managing partner?	Percentage ownership
								2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	

Form 8868 (Rev. 1-2014)						Page 2
• If you are filing for an Additional (Not Automatic) 3-Month Ex	tension,	complete only Part II and check this	box		>	X
Note. Only complete Part II if you have already been granted an a	automatic	3-month extension on a previously fi	led Form	8868.	_	
 If you are filing for an Automatic 3-Month Extension, comple 	te only Pa	art I (on page 1).				
Part # Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies r	needed).	
		Enter filer's	identifyi	ng numb	er, see ins	tructions
Type or Name of exempt organization or other filer, see instru	ctions.		Employe	r identific	ation numb	oer (EIN) or
print CEODCIA CECTION DOS OF SMED	T ()	TNO		E 0	1 0 0 0 0 1	_
File by the due date for Number at cost and recommendate for					108901	
filing your FOO WELCH COOCCUTE TO DO NO. 17 a P.O. DOX, S		tions.	Social se	cunty nu	mber (SSN	1)
Instructions City, town or post office, state, and ZIP code. For a fo						
ROSWELL, GA 30075	oreign add	ress, see instructions.				
RODALDEY OH 30073						
Enter the Return code for the return that this application is for (file	a genara	te application for each return)				0 1
and the result of the result that the application is for the	o a sopara	ico application for each return,				لتلتا
Application	Return	Application				Return
is For	Code	Is For				Code
Form 990 or Form 990-EZ	01					
Form 990-BL	02	Form 1041-A				08
Form 4720 (Individual)	03	Form 4720 (other than individual)				09
Form 990-PF	04	Form 5227				10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form 990-T (trust other than above)	06	Form 8870				12
STOP! Do not complete Part II if you were not already granted			iously file	d Form	8868.	
THE GEORGIA SEC						
• The books are in the care of > 300 AVE OF CHAM	MPION		SARDE	NS,	<u>⊬ъ 334</u>	18
Telephone No. ► 561.624.8400		Fax No. ▶				
If the organization does not have an office or place of business						الـا
• If this is for a Group Return, enter the organization's four digit	1	- - 1				
box . If it is for part of the group, check this box . I request an additional 3-month extension of time until		ch a list with the names and EINs of BER 15, 2014.	all memb	ers the e	xtension is	tor.
5 For calendar year 2013, or other tax year beginning	10 A FILE		_			
6 If the tax year entered in line 5 is for less than 12 months, cl	heck reas	on: Initial return	J Final ı	etum		
Change in accounting period	HOUR FOAS	on marreton		otam		
7 State in detail why you need the extension						
	SATHE	R THE NECESSARY ACC	COUNT	ING		
INFORMATION REQUIRED TO PREPAR	RE A	COMPLETE AND ACCURA	ATE T	AX R	ETURN.	
8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax, less any				
nonrefundable credits. See instructions.			8a	\$		0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	y refundable credits and estimated				
tax payments made. Include any prior year overpayment alle	owed as a	credit and any amount paid				•
previously with Form 8868.			8b	\$		0.
c Balance due. Subtract line 8b from line 8a. Include your page.	yment wit	h this form, if required, by using	1			0
EFTPS (Electronic Federal Tax Payment System). See instru			8c	\$		0.
		st be completed for Part II o				. 1 4
Under penalties of perjury, I declare that I have examined this form, including the base person and the 1.3m authorized to proper the form	ing accomp	anying schedules and statements, and to			_	ellet,
it is true, correct, and complete, and that I am authorized to prepare this fo			D.A.	~ ~	bally	

Form 8868 (Rev. 1-2014)