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332001 10-29-13

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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 F	or the	2013 calendar year, or tax year beginning		and ending			
İ	B Cr	heck if	C Name of organization		·	D Employer id	entificatio	on number
	<u> </u>	Addre	TN SECTION PGA OF AME	RICA				
		Name chang				6:	2-0863	3884
		Initial return	Number and street (or P.O. box if mail is not de	elivered to street address)	Room/suite			-
		Termir ated	400 FKANKDIN KD			6:	<u> 15-79</u> (0-7 <u>6</u> 00
		Ameno	City or town, state or province, country, and		е	G Gross receipts \$		2,325,240.
		Application tion pendir	FRANKUIN, IN 3/003-0			H(a) Is this a gr	oup return	
		ponu.	F Name and address of principal officer: U E	FF ABBOT		for subord		Yes X No
			same as C above			H(b) Are all subord		
) ◀ (insert no.) 4947((a)(1) or 527	┥ :		(see instructions)
		/ebsit		Association Other	I. Van	H(c) Group exe		mber ▶ te of legal domicile [.] TN
1		rt II	Summary	issuciation Other	IL Year	oi iormation. 19	/ 2 M Sta	te of legal domicile. TIV
1			Briefly describe the organization's mission or mos	t significant activities. Se	e Schedi	ile O		
	Activities & Governance	•	briefly describe the organization's mission of mos	st significant activities: Do	e benea	110 0		
	ıa	2	Check this box I if the organization disc	ontinued its operations or i	disposed of mor	e than 25% of its	net assets	
	š		Number of voting members of the governing bod	•	disposed of file	c triair 2070 or its	3	11
	ğ		Number of independent voting members of the g	• • •	e 1b)	-	4	11
	SS SS		Total number of individuals employed in calendar	· · · · · ·			. 5	83
	ij		Total number of volunteers (estimate if necessary	· ' '	KECE	EIVED	6	100
	ŧ		Total unrelated business revenue from Part VIII, o	·			7a	0.
		b	Net unrelated business taxable income from Forr	n 990-T, line 34	DCI 2	2014	7b	0.
				Ä		Prior Year		Current Year
	ايو	8	Contributions and grants (Part VIII, line 1h)			4 28		6,050.
	립	9	Program service revenue (Part VIII, line 2g)	J	. UGDE	N1 [598,1		1,733,338.
	Revenue	10	Investment income (Part VIII, column (A), lines 3,	4, and 7d)		55,5		107,298.
	٦,	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8	c, 9c, 10c, and 11e)		15,0		15,000.
	_	12	Total revenue - add lines 8 through 11 (must equ	al Part VIII, column (A), line	12)	1,673,5		1,861,686.
			Grants and similar amounts paid (Part IX, column		<u> </u>	20,3		12,650.
			Benefits paid to or for members (Part IX, column			<u> </u>	0.	0.
	ses		Salanes, other compensation, employee benefits	• • • • • • • • • • • • • • • • • • • •	5-10)	504,7		521,331.
	Expenses		Professional fundraising fees (Part IX, column (A)	· .	_ ^ ⊢		0.	0.
	ᄶ		Total fundraising expenses (Part IX, column (D), li	· —	<u> </u>	1 166 0		1 264 254
	_		Other expenses (Part IX, column (A), lines 11a-11		<u> </u>	1,166,8		1,264,254.
			Total expenses. Add lines 13-17 (must equal Part		 	<18,4		63,451.
	is o	19	Revenue less expenses Subtract line 18 from lin	e 12		eginning of Current		
	ets C	20	Total assets (Part X, line 16)		⊢ °	1,542,0		End of Year 1,662,420.
	Ass		Total liabilities (Part X, line 26)		 	172,8		152,329.
;	Pure		Net assets or fund balances Subtract line 21 from	m line 20	 	1,369,2		1,510,091.
		rt II	Signature Block					
			Ities of perjury, I declare that I have examined this return	n, including accompanying scl	hedules and staten	nents, and to the bes	t of my kno	wledge and belief, it is
=			t, and complete. Declaration of preparer (other than offi					
			I delin Dabbat			10-	16.20	> 1 박
5	Sıgr	1	Signature of officer			Date		
Ò	Here		JEFF ABBOT, EXECUTIVE	DIRECTOR		_		
			Type or print name and title					
			Print/Type preparer's name	Preparer's signature			ieck	PTIN
	Paid					ıf se	lf-employed	
		arer	Firm's name			Firm's E	N 🛌	
	Use	Only	Firm's address					
						Phone n	0	; , , , , , , , , , , , , , , , , , , ,
	May	the !!	RS discusse this return with the preparer shown at	YOUGH (coo instructions)				Voc No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2013)

	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		<u> </u>
	Briefly describe the organization's mission: See Schedule O		
	bee benedule o		
		·	
	Did the organization undertake any significant program services during the year which were not listed on		
	the pnor Form 990 or 990-EZ?	Yes	XN
	If "Yes," describe these new services on Schedule O.	_	
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X N
	If "Yes," describe these changes on Schedule O.		
	Describe the organization's program service accomplishments for each of its three largest program services, as		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total expenses,	and
a	revenue, if any, for each program service reported. (Code) (Expenses \$ including grants of \$) (Revenue)		
•	TOURNAMENTS - THE TENNESSEE SECTION PROMOTED THE GAME OF		
	PROVIDING PLAYING OPPORTUNITIES FOR GOLF PROFESSIONALS		
	ALIKE. THESE PLAYING OPPORTUNITIES ENCOURAGE MORE PART	ICIPATION IN	THE
	GAME OF GOLF BY PROMOTING THE GAME THROUGH ITS GRASS RO	OTS EFFORTS	IN
	THE TENNESSEE SECTION BOUNDARIES.		
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10-29-13

Form 990 (2013)

TN SECTION PGA OF AMERICA

Part IV Checklist of Required Schedules 62-0863884 Page 3

	`		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		x
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		X
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	L
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		X
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		X
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			
	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,		х	
	Part VI	11a		
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446		х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
а	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	110		
•	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
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
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			j
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			۱
	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	40		х
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	'''-		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		\vdash	
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			990	(2013)

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Page 4

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 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization anamian an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? to defease any tax-exempt bonds? d Did the organization and so to behalf of "issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? b is the organization and so the interpolate Schedule L, Part I I b is the organization and that the transaction have that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction and that the transaction have not been reported on any of the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X X Did the organization receive contributi		•		Yes	No
Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, coulim (A), line 27 if 17'es, "complete Schedule i, Parts I and III 22 X X Did the organization answer "Yes" to Part VI, 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 I. Part IV and the organization have a tax-exempt bond save with an outstanding principal amount of more than \$100,000 as of the sist 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 25s Did the organization have a tax-exempt bonds beyond a temporary penide exception? Did the organization are seriow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization area an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these genization in party to a business transaction with one of the following parties (see Schedule L, Part IV or An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV or An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV or An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV or An entity of which a current or former officer	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
column (A), line 27 if "Yes," complete Schedule i, Parts I and ill Did the organization answer "Yes" to Part IVI, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, instales, key employees, and highest compensated employees? If "Yes," complete Schedule J 2d Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a bid the organization invest any proceeds of tax-exempt bonds beyond a temporary penied exception? cibit the organization invest any proceeds of tax-exempt bonds beyond a temporary penied exception? 2db the organization invest any an exempt bonds beyond a temporary penied exception? 2dc Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 2da 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 bis the organization aware that tengaged in an excess benefit transaction with a disqualified person oluming the year? If "Yes," complete Schedule L, Part II bis the organization aware that tengaged in an excess benefit transaction with a disqualified person in a proryear, and that the transaction has not been reported on any of the organization's pror Forms 990 or 990EZ? If "Yes," complete Schedule L, Part II bid the organization are provide a grant or other assistance to an officer, director, trustee, key employees, substantial contributor or employee thereof, a grant assistance to an officer, director, trustee, or dispolyee, substantial contributor or employee thereof, a grant assistance to an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV d harmly member of a current or former officer, director, trustee, or key emp		government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
and former officers, drectors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23	22		22		Х
24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No! go to line 25s. 24a X. 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? 25c 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 II 25c Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person of any expert of the the transaction were that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustes, key employees, or disqualified persons? If yes, complete Schedule L. Part II 25d Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L. Part III 25d Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L. Part IV 27d Was the organization review or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV 28d A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV 28d Did the organization review or indirect owner? I	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25s Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? 24b		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
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Schedule K. If *No*, go to line 25a b Did the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? c Did the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? c Did the organization invest any proceeds of tax exempt bonds beyond a temporary penod exception? d Did the organization and at as an 'on behalf of' issuer for bonds outstanding at any time during the year? d Did the organization and at as an 'on behalf of' issuer for bonds outstanding at any time during the year? 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? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any time during the year? 24d	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
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c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonde? 24c 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 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-E27 If "Yes," complete Schedule L, Part II 25b 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, nighest compensated employees, or disqualified persons? If so, complete Schedule L, Part III 27b Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 28b Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable fling thresholds, conditions, and exceptions): 29a A family member of a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or director, and		Schedule K. If "No", go to line 25a	24a		X
any tax-exempt bonds? 246 247 258 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 I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction ware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction ware 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 E2? If "Yes," complete Schedule L, Part I I I Is 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, trustes, key employees, injhest compensated employees, or disqualified persons? If so, complete Schedule L, Part II I Is Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV Instructions for applicable filing thresholds, conditions, and exceptions): 27	þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 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 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 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 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		Schedule N, Part II	32		X
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	33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 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 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		sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 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 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	34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			۱
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 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 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		Part V, line 1	34		X
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 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 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			35a		Х
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 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	b				
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 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			35b		<u> </u>
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 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	36		l		
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37			36	<u> </u>	 _
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	37				.
Note. All Form 990 filers are required to complete Schedule O			37	 	1
	38			_w	
		Note. All Form 990 filers are required to complete Schedule O			<u> </u>

Form **990** (2013)

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	Check if Schedule O contains a response or note to any line in this Part V			
		$\neg \neg$	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 118			
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	Х	
2 a	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 83			
b	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)		- 1	v
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u>X</u>
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
48	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4.		X
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:	4a		
b	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		Х
	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		
	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		X
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).			
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		
	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			
	to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
e •	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		_
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 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.		-	
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		L
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:	1		
	Gross income from members or shareholders 11a			
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
120	amounts due or received from them.) Section 4947(aV1) non-exempt charitable truste le the exemptation filing Form 999 in lay of Form 19443	12a		1
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	128	-	├──
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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.			
ь	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990	(2013)

62-0863884 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					
Sec	tion A. Governing Body and Management					
		Ι.	1 11		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	11	1 1		
	If there are material differences in voting rights among members of the governing body, or if the governing		1			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1	11			
b	Enter the number of voting members included in line 1a, above, who are independent	1b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	n any other			v
_	officer, director, trustee, or key employee?	٠.		2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ect supervision			v
	of officers, directors, or trustees, or key employees to a management company or other person?			3	-	X
4	Did the organization make any significant changes to its governing documents since the prior Form			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?	•	5	X	
6	Did the organization have members or stockholders?			6		<u> </u>
/a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoin	t one or	l I	v	
	more members of the governing body?			7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stocki	nolders, or		Х	
_	persons other than the governing body?		ha falla	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by t	ne following:		x	İ
	The governing body?			8a	X	
_	Each committee with authority to act on behalf of the governing body?			8b		├──
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	at the			х
500	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		in Code)	9		
360	tion B. Policies (This Section B requests information about policies not required by the Internal F	eveni	Je Code)		Yes	Na
100	Did the erganization have lessel chanters, branches, or offiliates?			10a	X	No
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such or such control or su	shanta	ore affiliates	10a		\vdash
U	and branches to ensure their operations are consistent with the organization's exempt purposes?	napie	as, anniates,	10b	X	
112	Has the organization provided a complete copy of this Form 990 to all members of its governing box	dy hof	ore filing the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	uy bei	ore ming the form:	110		\vdash
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to co	nflicts?	12b	X	_
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			125		_
·	in Schedule O how this was done	, 00,	30307100	12c	X	
13	Did the organization have a written whistleblower policy?			13	X	\vdash
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 approx	al by	ındenendent	<u> </u>		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision'		пасрепаст			
а	The organization's CEO, Executive Director, or top management official	•		15a	Х	
	Other officers or key employees of the organization			15b	X	\vdash
_	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 arrange	ement	with a			l
_	taxable entity during the year?			16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluation	ate its	participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic					
	exempt status with respect to such arrangements?			16b		
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 (Sec	ction 501(c)(3)s only)	avaılab	le	
	for public inspection. Indicate how you made these available. Check all that apply.	,	.,,,			
	Own website Another's website X Upon request Other (explain	n ın Se	chedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or			nd finar	ncial	
	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 a	and re	cords of the organiza	ition:	•	
	TN SECTION PGA CONTROLLER - 561-624-8400					
	300 AVE OF THE CHAMPIONS #205, PALM BEACH GARDENS	, F	L 33410-18	148		
33200	3 10-29-13			Form	990	(2013)

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

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 (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, 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.

Check this box if neither the organ		orga	niza			npe	nsat			
(A)	(B)			() Pos	2)			(D)	(E)	(F)
Name and Title	Average	(do	not c	heck	more	than	one	Reportable	Reportable	Estimated
	hours per	box	, unie cer an	ss pe id a d	rson irecto	ıs bot or/trus	h an tee)	compensation	compensation	amount of
	week	<u> </u>					Ė	from	from related	other
	(list any hours for	薑				L		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	ě	eat		l	sale		(W-2/1099-MISC)	(11 2/ 1033 11/100)	organization
	organizations	individual trustee or director	al trus		æ	mper		(** 2, 1000 *********************************		and related
	below	la de	ngu	_	줱	st co				organizations
	line)	Mpul	Institutional trustee	Officer	кеу етріоуев	Highest compensated employee	Former			
(1) HUNT GILLIAND	2.00								_	_
PAST PRESIDENT		X		L.	<u> </u>			0.	0.	0.
(2) LAMAR MILLS	1.00					İ				
DIRECTOR	1.00	X			<u> </u>	<u> </u>	L	0.	0.	0.
(3) JIM VERNON	1.00				1	l				•
DIRECTOR	1.00	Х	_		<u> </u>	<u> </u>	┡	0.	0.	0.
(4) CASEY BARNES DIRECTOR	1.00	x						0.	0.	0.
(5) NANCY QUARCELINO	1.00	1	\vdash		┝	<u> </u>			0.	0.
DIRECTOR	1.00	x			1			0.	0.	0.
(6) SCOTT MORAN	1.00	 			-	 	-			
DIRECTOR		\mathbf{x}						0.	0.	0.
(7) DOUG AMOR	1.00	T	Г		 	İ				
DIRECTOR		X			l			0.	0.	0.
(8) PAUL REID	1.00									
DIRECTOR		Х	L				L	0.	0.	0.
(9) NEIL COLLINS	2.00						j	_		_
PRESIDENT			<u> </u>	X		L	匚	0.	0.	0.
(10) KEN CROWDER	2.00			l						
VICE PRESIDENT		ļ		Х	<u> </u>	<u> </u>	╙	0.	0.	0.
(11) JOHNNY BRIDGEMAN	2.00	ļ		١						_
SECRETARY	EE 00	<u> </u>	_	X	_	 		0.	0.	0.
(12) JEFF ABBOT	55.00	ł		x				145,687.	0.	20 245
EXECUTIVE DIRECTOR		⊢	-	^	-	├	_	145,00/.	0.	20,345.
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Form 990 (2013)

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Par	t VII Section A. Officers, Directors, Trus	tees. Key Em	ploy	ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
	· (A)	(B)			•	C)	_	_	(D)	(E)			(F)	
	Name and title	Average		not c		more	than		Reportable	Reportable			tımate	
		hours per week					is bot or/trus		compensation from	compensation from related			nount (other	ot
		(list any	Ęģ.						the	organization			pensa	tion
		hours for	or director				Sated		organization	(W-2/1099-MIS	3C)	fr	om the	е
		related organizations	B	truste			pensa		(W-2/1099-MISC)			_	anızatı	
		below	lual tri	tonat		ploye	mo at						d relati Inizatio	
		line)	Indiwdual	Institutional trustee	Officer	Кеу етрюуев	Highest compens employee	Former				o, g.		5
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			1		1						ļ			
1b	Sub-total		<u> </u>	<u> </u>	<u> </u>		٠	▶	145,687.		0.	2	0,3	45.
С	Total from continuation sheets to Part V	II, Section A							0.		0.			0.
	Total (add lines 1b and 1c)							▶	145,687.		0.	2	0,3	<u>45</u> .
2	Total number of individuals (including but i	not limited to th	nose	liste	ed a	bov	e) w	ho r	received more than \$100	0,000 of reportab	le			
	compensation from the organization												V	
•	Did the executation later. Common officer		4_	- 1		1-			hhh		1		Yes	No
3	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s			е, к	ey er	при	oyee	, or	nignest compensated e	mpioyee on		3		х
4	For any individual listed on line 1a, is the s			omn	ens	atioi	n an	d ot	her compensation from	the organization				
•	and related organizations greater than \$15	-		•					•	ano organization		4	X	
5	Did any person listed on line 1a receive or									idual for services	,			
	rendered to the organization? If "Yes," con								_			5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co										npens	ation	from	
	the organization. Report compensation for	the calendar y	ear/	end	ing v	with	or w	/ithi		year				
	(A) Name and business	address							(B) Description of s	services	c	ر edmo	C) nsatio	n
TEI	NESSEE GOLF ASSOCIATI								TOURNAMENT					
	FRANKLIN ROAD, FRANK		3	70	69				OPERATIONS			24	9,9	74.
								\exists						
								_						
								\dashv	<u> </u>	····				
	Total number of independent contractors	including but r	not li	mıte	ed to	the	se h	ster	d above) who received r	nore than				
_	\$100,000 of compensation from the organ	-					1	J.U(2 22010, 11110 10061160 I	nore uran				
							_					Form	gan /	2012

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	`	Check if Schedule O conf	tains a response	or note to any lir	ne in this Part VIII			
		Orisek ii Scriedule O Coll	162DUI136	or note to any lif	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
tr st	1 a	Federated campaigns	. ta					
ē ā	b	Membership dues	. 1b					
Am,	С	Fundraising events	1c]			
護희	d	Related organizations	1d		1			
E,	е	Government grants (contribut	tions) 1e		1			
P. E.	f	All other contributions, gifts, gran	its, and		1			
호리		similar amounts not included abo	ve 1f	6,050.				
퉏	g	Noncash contributions included in lines	s 1a-1f \$		1			
Contributions, Gifts, Grants and Other Similar Amounts	<u>h</u>	Total. Add lines 1a-1f		<u> </u>	6,050.			
				Business Code				1
<u>8</u>	2 a	TOURNAMENT REVE		900099	664,529.	664,529.		
Program Service Revenue	b	HANDICAP REVENU	JE	900099	631,710.	631,710.		
n S	С	SPONSORSHIP		900099	186,191.			186,191.
eg a	d	ADP FUNDING		900099	121,114.	121,114.		
5	е	MEMBER DUES		900099	88,265.	88,265.	· · · · · · · · · · · · · · · · · · ·	<u> </u>
۱ ۵	f	All other program service reve	enue	900099	41,529.	41,529.		
	g	Total. Add lines 2a-2f		<u></u>	1,733,338.			
l	3	Investment income (including	dıvıdends, ınter	est, and	0.5 504			25 704
		other similar amounts)		>	36,784.			36,784.
	4	Income from investment of ta	x-exempt bond p	proceeds	15 000			15 000
	5	Royalties			15,000.			15,000.
- 1			(i) Real	(II) Personal	1			
i	6 a	Gross rents						-
	b	Less: rental expenses			ļ			
	C	Rental income or (loss)		<u> </u>	}			1
	_ d	Net rental income or (loss)		<u> </u>				
	7 a		(i) Securities	(II) Other				
		assets other than inventory	534,068.		1]		
	b		463,401.	153.				
		and sales expenses	70,667		Į.			
	C	Gain or (loss)	70,007.	1 /132.	70,514.			70,514.
	d	Net gain or (loss)			70,514.			70,514.
enne	8 a	Gross income from fundraising sincluding \$	•					
ě		contributions reported on line	of					
Other Rev		Part IV, line 18	a (C). See					İ
Ę.	h	Less: direct expenses	a b		1			
δļ			_		1			
		Gross income from gaming a	•		 			
	- u	Part IV, line 19	a a]		
	b	Less: direct expenses	b		1			}
			-		†			
		Gross sales of inventory, less	=					_
		and allowances	а					
	ь	Less: cost of goods sold	Ь	———	1			
	С	Net income or (loss) from sale	es of inventory		1			1
		Miscellaneous Reveni		Business Code				
	11 a]			1
	b							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d						
	12	Total revenue. See instructions.		<u> </u>	1,861,686.	1,547,147.	0	
33200 10-29	13							Form 990 (2013)

		· ccc. Expono				
Saction 50	1/c)/3) and 501/c)/A)	organizations must com	niete all columns. All other	r araanizatione muel	complete colum	n /41

	Check if Schedule O contains a respons	(A)	this Part IX (B)	(C)	(D)
b, 8b, 9	nclude amounts reported on lines 6b, lb, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	nts and other assistance to governments and			İ	
orga	anizations in the United States. See Part IV, line 21	10,650.			
	nts and other assistance to individuals in				
the	United States. See Part IV, line 22	2,000.			
Gra	nts and other assistance to governments,			1	
-	anizations, and individuals outside the			1	
	ted States. See Part IV, lines 15 and 16				
	nefits paid to or for members			 	
	npensation of current officers, directors,	166 030			
	stees, and key employees	166,032.			
	npensation not included above, to disqualified				
•	sons (as defined under section 4958(f)(1)) and				
	sons described in section 4958(c)(3)(B)	204 427			
	er salaries and wages	294,437.			
	sion plan accruals and contributions (include				
	tion 401(k) and 403(b) employer contributions)	20 725		ļ	
	er employee benefits	28,725.			
_	vroll taxes	32,137.			
	es for services (non-employees):	7 417			
	nagement	7,417.			
b Leg					
	counting				
	bbying				
	fessional fundraising services. See Part IV, line 17				
	estment management fees				
-	er. (If line 11g amount exceeds 10% of line 25,	c coc		1	
	imn (A) amount, list line 11g expenses on Sch O.)	6,686.			
	vertising and promotion	5,718.			
	ce expenses	63,237.			··· <u>-</u> · -
	ormation technology .				
-	/alties	15 716			-
	cupancy .	15,716.			
Trav	vel [65,354.			
•	ments of travel or entertainment expenses				
	any federal, state, or local public officials				
	nferences, conventions, and meetings				
	erest			<u> </u>	
,	ments to affiliates	17 200		ļ — — — — — — — — — — — — — — — — — — —	
•	preciation, depletion, and amortization	17,392.			
	urance	9,205.			
abo\ 24e	er expenses. Itemize expenses not covered ve. (List miscellaneous expenses in line 24e. If line amount exceeds 10% of line 25, column (A) bunt, list line 24e expenses on Schedule 0.)				
	OURNAMENT PRIZES	375,027.			
	TE FEE EXPENSE	270,612.			
	ANDICAP EXPENSE	224,905.		 	•
	ROCESSING FEES	95,103.		 	
_	other expenses	107,882.		 	
	al functional expenses Add lines 1 through 24e	1,798,235.		 	
	nt costs. Complete this line only if the organization			 	
	orted in column (B) joint costs from a combined				
•	cational campaign and fundraising solicitation.				
Juul	ck here if following SOP 98-2 (ASC 958-720)				

Form 990 (2013)
Part X | Balance Sheet

	Check if Schedule O contains a response or note to any line in this Part X	 -		
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	219,159.	1	125,603
2	Savings and temporary cash investments	184,949.	2	168,583
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	38,997.	4	165,892
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete		_ [
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instr). Complete Part II of Sch L		_ 6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	15,252.	9	14,07
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 117, 989.			
Ь	Less: accumulated depreciation 10b 83,825.	51,708.	10c	34,16
11	Investments · publicly traded securities	1,032,030.	11	1,154,10
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,542,095.	16	1,662,42
17	Accounts payable and accrued expenses	63,225.	17	50,95
18	Grants payable .		18	
19	Deferred revenue	109,651.	19	101,37
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,			
22	key employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
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 .		25	
26	Total liabilities. Add lines 17 through 25	172,876.	26	152,32
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
	complete lines 27 through 29, and lines 33 and 34.			_
27	Unrestricted net assets	1,369,219.	27	1,510,09
27 28 29 30 31 32	Temporanly restricted net assets		28	
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐			
1	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	1,369,219.	33	1,510,09
34	Total liabilities and net assets/fund balances	1,542,095.	34	1,662,42

Form **990** (2013)

Form 990 (2013)

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.

OMB No 1545-0047

Open to Public 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.

		01(c)(4), (5), or (6) organiza	tions: Complete Part III	7 Tax; 01 F01111 990-E2	L, Fait V, line 550 (Fit	UAY 16	ix), tileli
	ne of orga		-			Emplo	yer identification number
			ION PGA OF AMERIC				62-0863884
Pa	art I-A	Complete if the org	janization is exempt und	er section 501(c)	or is a section 5	27 or	ganization.
1	Provide a	a description of the organiz	ation's direct and indirect politica	al campaign activities i	ın Part IV.		
2	Political	expenditures		ė	•	▶\$.	
3	Voluntee	r hours		•		-	
Pa	ert I-B	Complete if the ord	ganization is exempt und	er section 501(c)	(3)		
1			incurred by the organization und		νογ.	▶\$	
2		-	incurred by organization manage		i	▶ \$	
			in 4955 tax, did it file Form 4720 t			•	Yes No
4 a	Was a co	orrection made?					Yes No
		describe in Part IV.					
Pa	art I-C	Complete if the org	panization is exempt und	er section 501(c)	, except section :	501(d	:)(3).
1	Enter the	amount directly expended	d by the filing organization for sec	tion 527 exempt func	tion activities	▶\$	
2	Enter the	e amount of the filing organ	ization's funds contributed to oth	ner organizations for se	ection 527		
	exempt t	unction activities				▶\$.	
3		empt function expenditures	s. Add lines 1 and 2 Enter here a	nd on Form 1120-POL	,		
	line 17b					▶\$.	
	_	iling organization file Form	, ,,				Yes No
5			nployer identification number (EII		-		
	-	•	tion listed, enter the amount paid				•
			omptly and directly delivered to a additional space is needed, provi			eparat	e segregated fund of a
	·	(a) Name	(b) Address	(c) EIN	(d) Amount paid fr	rom	(e) Amount of political
		(a) Hairio	(5) / (33/000	(0) 2	filing organization		contributions received and
					funds. If none, ente	er -0	promptly and directly
							delivered to a separate political organization.
							If none, enter -0
		· · · · · · · · · · · · · · · · · · ·					
			· · · · · · · · · · · · · · · · · · ·				
				<u></u>	<u></u>		

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

Schedule C (Form 990 or 990-EZ) 2013

LHA

332041 11-08-13

Schedule C (Form 990 or 990-EZ) 2013 Part II-A Complete if the organization	anization is e	N PGA OF AMEI xempt under section	RICA on 501(c)(3) and fil	62- ed Form 5768	0863884 Page 2
(election under sect	tion 501(h)).				
A Check ► ☐ if the filing organizat	ion belongs to an	affiliated group (and list	in Part IV each affiliated	group member's na	me, address, EIN,
expenses, and share	-	• ,			
B Check L if the filing organizat	on checked box	A and "limited control" pi	rovisions apply.		
	s on Lobbying Exitures" means ar	openditures mounts paid or incurred	l.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public opini	on (grass roots lobbying)			
b Total lobbying expenditures to influ	•				
c Total lobbying expenditures (add lir	•	, (,g,		· · · · · · · · · · · · · · · · · · ·	
d Other exempt purpose expenditure	•			 	
e Total exempt purpose expenditures	•	1 1d)			
f Lobbying nontaxable amount Ente	•	•	oth columns		
If the amount on line 1e, column (a) or		lobbying nontaxable an		· · · · · · · · · · · · · · · · · · ·	
Not over \$500,000					ļ
		of the amount on line 1			
Over \$500,000 but not over \$1,000		0 000 plus 15% of the ex			Ì
Over \$1,000,000 but not over \$1,50	- 1	5.000 plus 10% of the ex			
Over \$1,500,000 but not over \$17,0		5,000 plus 5% of the exc	ess over \$1 500 000.		
Over \$17 000,000	\$1,0	00,000			
g Grassroots nontaxable amount (ent	or less, enter -0-				
i Subtract line 1f from line 1c. If zero	•				
j If there is an amount other than zer reporting section 4911 tax for this		or line 11, did the organi	zation file Form 4/20		Yes No
	ations that made umns below. Sec	Averaging Period Unde a section 501(h) election the instructions for line	on do not have to comp les 2a through 2f on pa		
	Lobbying Ex	penditures During 4-Ye	ear Averaging Period		- "
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount	<u>-</u>				
b Lobbying ceiling amount (150% of line 2a, column(e))				-	
c Total lobbying expenditures					
d Grassroots nontaxable amount	<u> </u>				
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 TN SECTION PGA OF AMERICA 62-086388 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)).

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a)	(b)
of the	e lobbying activity	Yes	No	Amo	unt
1	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				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	<u> </u>			
С	Media advertisements?				
d	Mailings to members, legislators, or the public?	<u> </u>			
е	Publications, or published or broadcast statements?				
f		ļ		_	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
ı.	Other activities?				
J	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912		'		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4),	on 501/c	1/5) or se	ction	
1. 4.	501(c)(6).	011 30 1(0)(J), UI 36	Cuon	
	001(0)(0).			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		1 2	X	44
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		1 2		X
_	t III-B Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)(5), or se	ction	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				ne 3, is
	answered "Yes."				
1	Dues, assessments and similar amounts from members	-	1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ical			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
С	Total .		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
	expenditure next year?		4		
_5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information		_		
Prov	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou	p list), Part	II-A, line 2; a	nd Part II-E	3, line 1.
Also,	complete this part for any additional information.				
		_			

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

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

TN SECTION PGA OF AMERICA

Employer identification number 62-0863884

Pai	t I Organizations Maintaining Donor Advise	d 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 v	vriting that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	=	Yes No
6	Did the organization inform all grantees, donors, and donor ac	•	used only
	for charitable purposes and not for the benefit of the donor or	• •	•
	impermissible private benefit?		Yes No
Pai		anization answered "Yes" to Form 990, F	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e	`	stoncally important land area
	Protection of natural habitat	· -	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form	of 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
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	• •	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	
	year >	,	
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it	<u> </u>	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements d	luring the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and e	•	
8	Does each conservation easement reported on line 2(d) abov		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	the organization's accounting for
	conservation easements.		· ·
Pa	t III Organizations Maintaining Collections of	Art, Historical Treasures, or O	ther 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	C 958), not to report in its revenue stater	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	· · · · · · · · · · · · · · · · · · ·	
	the text of the footnote to its financial statements that describ	oes these items.	•
ь	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statemen	t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	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 trea	 ssures, or other similar assets for financia	
_	the following amounts required to be reported under SFAS 1:		Q, F
а	Revenues included in Form 990, Part VIII, line 1	, ,	▶ \$
b	Assets included in Form 990, Part X	•	▶ \$
_		•-	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

		ION PGA OF					62-08		
Par	t III Organizations Maintaining C	ollections of Ar	t, Historic	al Treasures	, or Othe	er Simil	ar Asse	ts/continu	ed)
3	Using the organization's acquisition, accessi	on, and other records	s, check any	of the following t	that are a s	ignificant	use of its	collection	rtems
	(check all that apply).								
а	Public exhibition	d	Loan	or exchange pro	grams				
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they fu	ther the organiz	ation's exe	mpt purpo	ose in Part	: XIII	
5	During the year, did the organization solicit o	r receive donations o	of art, historic	al treasures, or o	other simila	r assets		_	
	to be sold to raise funds rather than to be ma	aintained as part of th	ne organizati	on's collection?				Yes	No_
Par	t IV Escrow and Custodial Arran	gements. Comple	te if the orga	nization answere	ed "Yes" to	Form 990	, Part IV, I	ne 9, or	
	reported an amount on Form 990, Par	t X, line 21.							
1a	is the organization an agent, trustee, custod	an or other intermed	ary for contr	butions or other	assets not	ıncluded		_	
	on Form 990, Part X?							Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:						
							·	Amount	
c	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fi	orm 990, Part X, line	21?					Yes	No
b	If "Yes." explain the arrangement in Part XIII.								
Pai	t V Endowment Funds. Complete	f the organization and	swered "Yes"	to Form 990, P	art IV, line 1	10			
		(a) Current year	(b) Prior y	ear (c) Two y	ears back	(d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance								
b	Contributions .								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs .								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cur	rent year end balance	e (line 1g, col	umn (a)) held as:	:				
а	Board designated or quasi-endowment		_%						
b	Permanent endowment >	%							
С	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%.							
3а	Are there endowment funds not in the posse	ssion of the organiza	ition that are	held and admini	stered for t	he organi	zation	_	
	by:							\	res No
	(i) unrelated organizations							3a(ı)	
	(ii) related organizations							3a(iı)	\bot
b	If "Yes" to 3a(ii), are the related organizations	s listed as required or	n Schedule F	?				3b	
4	Describe in Part XIII the intended uses of the		wment funds						
Par	t VI Land, Buildings, and Equipm	ent.							
	Complete if the organization answere	d "Yes" to Form 990,	Part IV, line	11a. See Form 9	90, Part X,	line 10.			
	Description of property	(a) Cost or ot	her (t) Cost or other	(c) A	ccumulate	ed	(d) Book	value
		basis (investm	nent)	basis (other)	de	preciation			
1a	Land								
b	Buildings								
С	Leasehold improvements								
d	Equipment			20,751		19,5	76.		,175.
е	Other			97,238	3.	64,2	49.		,989.
~	Add long to through to (Column (d) must o	000 Dad	V == 1	/ 10/-\\			~ 1	3.4	76/

332053 09-25-13

10261016 791870 TNSEC

Schedule D (Form 990) 2013

TN SECTION PGA OF AMERICA

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

▶ Attach to Form 990.

1		
2013	Open to Public	Inspection

OMB No 1545-0047

Employer identification number

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

å | Schedule I (Form 990) (2013) 62-0863884 (h) Purpose of grant PROGRAM ASSISTANCE. or assistance X Yes 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 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 (g) Description of non-cash assistance valuation (book, FMV, appraisal, other) (f) Method of ö (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of 6,750 cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. TN SECTION PGA OF AMERICA 501(C)(3) Enter total number of other organizations listed in the line 1 table 58-1893478 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization TENNESSEE GOLF FOUNDATION or government FRANKLIN, TN 37069 400 FRANKLIN ROAD Part II Part I

Page 2

62-0863884

Schedule I (Form 990) (2013)
Part III Grants and Othe

(Form 990) (2013) TN SECTION PGA OF AMERICA Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(f) Description of non-cash assistance · (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance 332102 10-29-13

Schedule I (Form 990) (2013)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

TN SECTION PGA OF AMERICA

Employer identification number 62-0863884

1	int i Questions Regarding Compensation			
		\Box	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.	l	1	l
	First-class or charter travel Housing allowance or residence for personal use		1	1
	Travel for companions Payments for business use of personal residence		1	1
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			1
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			1
				l
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			1
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		<u>i </u>
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		1	
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		l
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.		ļ	
	Compensation committee Wintten employment contract			
	Independent compensation consultant Independent compensation consultant Independent compensation consultant			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing	-		
	organization or a related organization:	-		
а	Receive a severance payment or change-of-control payment?	4a		X
b		4b		X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	ľ		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.	l		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	- 1		
	contingent on the revenues of:	_ 1		
		5a		├
þ		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			1
	contingent on the net earnings of:	,		
		6a		
Þ		6b	<u> </u>	\vdash
_	If "Yes" to line 6a or 6b, describe in Part III.			
1	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	,		
_	F	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	_ ا		Ì
_	(4,7,-)	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in		ļ	1

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2013

332112 09-13-13

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Schedule J (Form 990) 2013

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, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	ple	(E) Total of columns	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(Q)·(i)(B)	reported as deferred in prior Form 990
(1) JEFF ABBOT	3	145.687.	0	0	7,282.	13,063.	166,032.	0
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							Sched	Schedule J (Form 990) 2013

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

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.

OMB No 1545-0047 Open to Public

Inspection

Name of the organization

Employer identification number

TN SECTION PGA OF AMERICA 62-0863684
Form 990, Part I, Line 1, Description of Organization Mission:
TO ELEVATE THE STANDARDS OF THE PROFESSIONAL GOLFER'S VOCATION AND TO
PROMOTE INTEREST IN THE GAME OF GOLF.
Form 990, Part III, Line 1, Description of Organization Mission:
TO ELEVATE THE STANDARDS OF THE PROFESSIONAL GOLFER'S VOCATION AND TO
PROMOTE INTEREST IN THE GAME OF GOLF.
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 ELECT MEMBERS OF THE GOVERNING
BODY.
Form 990, Part VI, Section A, line 7b:
Explanation: MEMBERS MAINTAIN THE RIGHT TO RATIFY DECISIONS MADE BY THE
GOVERNING BODY.
Form 990, Part VI, Section B, line 11:
Explanation: THE EXECUTIVE DIRECTOR OF THE TENNESSEE SECTION REVIEWS THE
COMPLETED 990 RETURN FOR COMPLETENESS AND ACCURACY PRIOR TO FILING. IN
ADDITION, A COPY IS SUPPLIED TO THE BOARD FOR REVIEW AND APPROVAL.
Form 990, Part VI, Section B, Line 12c:

Explanation: THE SECTION INTERVIEWS OFFICERS AND DIRECTORS ABOUT ANY

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

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

TNSEC__1

332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization TN SECTION PGA OF AMERICA	Employer identification number 62-0863884
POTENTIAL CONFLICTS AND REVIEWS THE CONFLICT OF INTEREST	POLICY WITH THEM
ANNUALLY.	
Form 990, Part VI, Section B, Line 15:	
Explanation: THE EXECUTIVE DIRECTOR'S COMPENSATION IS DE	
EXECUTIVE COMMITTEE BASED ON SURVEY INFORMATION FROM OTH	ER PGA OF AMERICA
SECTIONS, FINANCIAL STATUS OF THE SECTION, AND A PERFORM	ANCE REVIEW.
Form 990, Part VI, Section C, Line 19:	
Explanation: THE ASSOCIATION MAKES ITS FINANCIAL STATEME	NTS AND OTHER
GOVERNING DOCUMENTS AVAILABLE AT THE PUBLIC'S REQUEST BY	CONTACTING THE
TENNESSEE SECTION OFFICE.	
Form 990, Part XI, line 9, Changes in Net Assets:	
CURRENT YR SECTION 481(A) ADJ	20,492.
	

TNSEC__1

Form 886	8 (Rev. 1-2014)						Page 2
If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	box		▶ {	X
	ly complete Part II if you have already been granted an a				8868.	_	_
	are filing for an Automatic 3-Month Extension, comple						
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies ne	eded)	
			Enter filer's				uctions
Type or	Name of exempt organization or other filer, see instru	etions	Citter mer s			tion number	
print	Trains of example organization of other filer, see many	16(10113.		Linploye	i locitinos	NON Humber	1 (114) 01
File by the	TN SECTION PGA OF AMERICA				62-0	863884	ı
rive date for	Number, street, and room or suite no. If a P.O. box, s	ee instnic	tions	Social se	cunty num		<u> </u>
filing your return Soe	400 FRANKLIN RD			0002700		100, (00,1)	
instructions	City, town or post office, state, and ZIP code. For a fo	oreign add	Iress see instructions.				
	FRANKLIN, TN 37069-8204						
							
Enter the	Return code for the return that this application is for (file	a cenara	ta application for each return			ľ	0 1
Citter tile	(letain code for the retain that this application is for the	o a separa	te application for each return,		•	L.	لشلت
Applicati	00	Return	Application				Return
is For	on .	Code	Is For			}	Code
	or Form 990-EZ	01	15 Pol		-73° -74		Code
		02			<u> </u>		08
Form 990		1	Form 1041-A				09
	(Individual)	03	Form 4720 (other than individual)				10
Form 990		05	Form 6069				11
	-T (sec. 401(a) or 408(a) trust)	06	Form 8870				12
	FT (trust other than above) o not complete Part II if you were not already granted						
310P. D			ROLLER - 300 AVE O				
• The be	ooks are in the care of ▶ #205 - PALM BEA				CITTAL	1 10110	
	ione No ► 561-624-8400	ACII GI	Fax No. ▶	010			
	organization does not have an office or place of business	a ia tha l le					
	is for a Group Return, enter the organization's four digit			f thic ic fo	r the whole	aroup chu	ack this
box ► {		, .	ch a list with the names and EINs of			_	
	· ·		per 15, 2014.	anthemo	ers me exi	ension is in	<u></u>
	calendar year 2013, or other tax year beginning	TO CITE	, and ending	^			
	the tax year entered in line 5 is for less than 12 months, c	hack reas		Final	eturo		
1	Change in accounting period	HUCK ICCO	on malaretom	1 11116111	CIOIII		
7 Sta	te in detail why you need the extension						
	DITIONAL TIME IS NEEDED TO	GATHE	R THE NECESSARY AC	COUNT	ING		
	FORMATION REQUIRED TO PREPAR					TURN.	
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8a If th	us application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069	enter the tentative tax, less any				
	refundable credits. See instructions.		,	8a	\$		0.
	as application is for Forms 990-PF, 990-T, 4720, or 6069	enter an	refundable credits and estimated	1 3			
	payments made Include any prior year overpayment all			341			
	eviously with Form 8868.	01100 03 0	ordan and any amount paid	8b	s		0.
	ance due. Subtract line 8b from line 8a. Include your pa	vment wit	h this form if required by using	1			
	'PS (Electronic Federal Tax Payment System). See instru	•		8c	s		0.
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linder nens	affies of perjury, I declare that I have examined this form, includi				f my knowla	edge and beli	ief,
it is true or	orrect, and complete, and that Jan authorized to prepare this fo	iui a account	yy somedans and and the tree to				-
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Form 8868 (Rev 1-2014)