DLN: 93493259010086

OMB No 1545-0047

Open to Public Inspection

Form **990**

Department of the Treasury Internal Revenue Service

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

▶ 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

A F	or the 201	calendar year, or tax year beginning 01-01-2015 , and ending 12-31-201	5			
B Che	eck if applica	le C Name of organization OREGON GOLF ASSOCIATION		D Emplo	yer iden	itification number
- Add	Iress change	CALCON GOL POSCENIZON		23-27	43830)
— Nar	me change	Doing business as		-		
– _{Init}	ıal return					
Fina	al	Number and street (or P O box if mail is not delivered to street address) Room/suit	te	E Teleph	one numb	per
retu	ırn/termınat	d 2840 HAZELNUT DR		(503)	981-4	653
— Am	ended returi	City or town, state or province, country, and ZIP or foreign postal code				
– App	olication pen	WOODBURN, OR 97071 ng		G Gross r	eceıpts \$	1,920,521
		F Name and address of principal officer	H(a) Ist	 :his a group	return	for
				ordinates?	recuiii	ΓYes Γ Νο
				all subord	nates	ΓYes Γ Νο
				luded?	- 14	/·
[Ta:	x-exempt st	tus				(see instructions)
1 VA/	absita. I	WWW O GA O RG	ri(c) Gr	oup exempt	ion nun	nder 🕶
	ebsite: F	www.oga.org				
		ion 🔽 Corporation Trust 🗆 Association 🗀 Other 🕨	L Year of	formation 19	24 M	State of legal domicile OR
Pa	rt I S	ımmary				
Activities & Governance	GAME THE C OPPC SERV		10TES ENH D TRADITIO LOPMENT (HANCEMEN ONS, AS W OF MEMBE	IT AND ELL AS R AND	EXPANSION OF PROMOTING INFORMATION
es es	2 Chec	this box দ if the organization discontinued its operations or disposed of	f more than	25% of its	net ass	ets
vý ab	l <u></u> .			ı	_	4.6
į		er of voting members of the governing body (Part VI, line 1a)		•	3	16
Ş		er of independent voting members of the governing body (Part VI, line 1b)			4	15
4.		number of individuals employed in calendar year 2015 (Part V, line 2a) .			5	11
		number of volunteers (estimate if necessary)			6	189
		unrelated business revenue from Part VIII, column (C), line 12 related business taxable income from Form 990-T, line 34			7a	102,432
	b Net u	elated business taxable income from Form 990-1, line 34		ior Year	7b	Current Vear
		ntributions and grants (Part VIII, line 1h)	Pr		754	Current Year 1,379,752
ō		gram service revenue (Part VIII, line 2g)	1,415,754			399,106
ē		estment income (Part VIII, olumn (A), lines 3, 4, and 7d)		<u> </u>	_	23,236
Revenue		ner revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		19,021		118,427
		ral revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	, 			
	12			1,885,	211	1,920,521
	13 Gı	nts and similar amounts paid (Part IX, column (A), lines 1-3)		54,	952	55,716
	14 Be	nefits paid to or for members (Part IX, column (A), line 4)				0
2 6		aries, other compensation, employee benefits (Part IX, column (A), lines	606,159 625,			
Expenses		10)				
<u>₹</u>		ofessional fundraising fees (Part IX, column (A), line 11e)	•			0
盃		ıl fundraısıng expenses (Part IX, column (D), line 25) ▶ <mark>0</mark>				
		ner expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		796,		793,902
		al expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,457,	-	1,475,441
. 02	19 Re	venue less expenses Subtract line 18 from line 12	•	427,	491	445,080
8 9 0 0			Beginning	of Current	Year	End of Year
net Assets of Fund Balances	20 To	al assets (Part X, line 16)		4,597,	550	4,562,431
Z 2		al liabilities (Part X, line 26)		1,715,	710	1,618,190
200		assets or fund balances Subtract line 21 from line 20		2,881,	-	2,944,241
Jnde ny ki	tII S r penalties nowledge a	gnature Block of perjury, I declare that I have examined this return, including accompany nd belief, it is true, correct, and complete Declaration of preparer (other the knowledge		ıles and sta	tement	s, and to the best of
				2016-09-08		
	T k	****				
		***** ignature of officer		Date		
Sign		ignature of officer		Date		
Sign				Date		
Sign		Ignature of officer ARBARA TRAMMELL Executive Director ype or print name and title Print/Type preparer's name Preparer's signature Da		heck / If	PTIN	
Sign)	Ignature of officer ARBARA TRAMMELL Executive Director ype or print name and title	ate C		PTIN P00094	697
Sign Here	e)	Ignature of officer ARBARA TRAMMELL Executive Director ype or print name and title Print/Type preparer's name Anthony L Hill CPA Firm's name Brenner & Company LLP CPAs	ate C	heck / If		697
Sign Here Paic Pre)	ARBARA TRAMMELL Executive Director ype or print name and title Print/Type preparer's name Anthony L Hill CPA Preparer's signature Anthony L Hill CPA	ate C se	heck if elf-employed	P00094	

Forn	n 990 (2015)					Page
Pai	t IIII Statem	ent of Program Serv	ice Accomp	lishments		
		Schedule O contains a resp	-			지
1	Briefly describe	the organization's mission		·		
GOL BY F	F FOR THE OREC	ASSOCIATION IS LICENS GON AND SW WASHINGTO E GAME'S INTEGRITY AN EADING IN THE DEVELOR	N REGION I D VALUED TR	T PROMOTES ENHANCEM RADITIONS, AS WELL AS I	1ENT AND EXPANSION C PROMOTING OPPORTUN	FTHE GAME OF GOLF
2	Did the organiza the prior Form 9	ition undertake any signific 90 or 990-EZ?	ant program se	ervices during the year which	ch were not listed on	ΓYes Γ∕ No
	If "Yes," describ	be these new services on S	chedule O			
3	Did the organization	ition cease conducting, or r	make sıgnıfıcaı	nt changes in how it conduc	ts, any program	⊤Yes ▼No
	If "Yes," describ	be these changes on Sched	ule O			
4	expenses Secti	ganization's program servic on 501(c)(3) and 501(c)(4 es, and revenue, if any, for) organization:	s are required to report the		
4a	(Code) (Expenses \$	1,354,480	including grants of \$) (Revenue \$)
	ADMINISTERED AF	PPROXIMATELY 12 GOLF COMPETI	TIONS ENCOMPAS	SSING 1577 ADULT CONTESTANTS	5	
4b	(Code) (Expenses \$	109,973	including grants of \$) (Revenue \$)
	PROVIDED HANDIO	CAPPING SERVICES FOR APPROXI	MATELY 39,730 II	NDIVIDUAL GOLFERS FOR 325 ME	MBER CLUBS	
4c	(Code) (Expenses \$	10,988	ıncludıng grants of \$) (Revenue \$)

) (Revenue \$

MEASURED AND RATED 11 AND 31 GOLF COURSES, RESPECTIVELY

including grants of \$

1,475,441

Other program services (Describe in Schedule O)

Total program service expenses ►

4d

4e

(Expenses \$

Form	990 (2015)			Page 3
Par	t IV Checklist of Required Schedules			
	r		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		N o
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
	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		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III **	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
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	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
	Section $501(c)(3)$, $501(c)(4)$, and $501(c)(29)$ organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L,</i>			
	Part IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		Νο
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

	990 (2015)					Page
Pai	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this		v			.⊏
	enest in content of content of a copenies of most to any mic in time				Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable	1a	8			
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b	0			
	Did the organization comply with backup withholding rules for reportable payments to gaming (gambling) winnings to prize winners?	o vend	dors and reportable	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	11			
b	If at least one is reported on line 2a, did the organization file all required federal emp Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file			2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during	g the y	year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation			3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a si over, a financial account in a foreign country (such as a bank account, securities account)?			4a		No
b	If "Yes," enter the name of the foreign country ►	k and	Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time durin	ng the	tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited the problem of th	tax sh	elter transaction?	5b		Νo
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			_		
6-	Deep the eventualities have applied event value that are neverally greater than \$10		0 and did tha	5c		N.a
	Does the organization have annual gross receipts that are normally greater than \$10 organization solicit any contributions that were not tax deductible as charitable cont If "Yes," did the organization include with every solicitation an express statement the	rıbutı	ons?	6a		No
	were not tax deductible?		· · · ·	6b		
	Did the organization receive a payment in excess of \$75 made partly as a contributi services provided to the payor?		d partly for goods and	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services p_{ij}	rovide	ed?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal proper file Form 8282?	ty for	which it was required to	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		, e		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a p	erson	al benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a person	onal b	enefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the orequired?		zation file Form 8899 as	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles Form 1098-C?	s, dıd i	the organization file a	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess but during the year?	siness	s holdings at any time			
0-		•		8		No
	Did the sponsoring organization make any taxable distributions under section 4966. Did the sponsoring organization make a distribution to a donor, donor advisor, or relative to the sponsoring organization make a distribution to a donor, donor advisor, or relative to the sponsoring organization make any taxable distributions under section 4966.			9a 9b		No No
10	Section 501(c)(7) organizations. Enter	iteu p	erson,	90		NO
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lıe	u of Form 1041?	12a		Νo
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state? ${\bf N}$ additional information the organization must report on Schedule O	ote. S	see the instructions for	13a		No
b	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	13b				
c	Enter the amount of reserves on hand	13c				
	L Did the organization receive any payments for indoor tanning services during the tax		?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explana	•		14b		

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

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	H		
	more members of the governing body?	7a 7b	Yes Yes	
	or persons other than the governing body?	70	1 65	
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		Νo
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		No
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of			

interest policy, and financial statements available to the public during the tax year

State the name, address, and telephone number of the person who possesses the organization's books and records ►BARBARA TRAMMELL 2840 HAZELNUT DRIVE WOODBURN, OR 97071 (503) 981-4653 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 (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- ◆ List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot ecto	not box h ar or/tr	checl c, unle n office ustee	ess er)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) ERIC FISKUM TOURN CHAIR	0 00	х						0	0	C
(2) BOB HARRINGTON Director	0 00	х						0	0	C
(3) JEFF ALLEN Treasurer	0 00	х		х				0	0	C
(4) CAMERON AZARI	0 00	x						0	0	C
Director	0 00									
(5) DON CLARK	0 00	x						0	0	C
(6) MARK REED IMMED PAST PRES	0 00	х						0	0	C
(7) ZACHARY HALL Director	0 00	х						0	0	C
(8) TRAVIS SCHOEN Director	0 00	х						0	0	C
(9) LYNN M MYRICK Director	0 00	х						0	0	C
(10) BARBARA GEE HANDICP/CRS RTG	0 00	х						0	0	C
(11) SCOTT BAINES Director	0 00	х						0	0	C
(12) RUSTY BECKEL Director	0 00	х						0	0	C
(13) LARA TENNANT JR GOLF CHAIR	0 00	х						0	0	C
JK GOLI CIIVAK			i	i						
(14) BARBARA TRAMMELL	40 00			x				135,021	0	C

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

	(A) Name and Tıtle	(B) Average hours per week (list any hours	more pers	than on is	one bot	note boo	chec x, unle n offic rustee	ess er	(D) Report compens from torganiz	able sation the ation	(E) Reportable compensation from related organizations	amount compe from	nated of other nsation the
		for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1 MIS		(W- 2/1099- MISC)	organi and re organi	elated
(15) T	OM GAFFNEY	0 00			х					0			0
	resident	0 00			-	_							
Preside	RIC SCHOENSTEIN ent	0 00			х					0		0	0
						\vdash							
1b c d	Sub-Total	VII, Section A				*		 	135,021				
2	Total number of individuals (including b \$100,000 of reportable compensation f				ed al	bove	e) who	rec	eived mor	e than		_	
3	Did the organization list any former office on line 1a? <i>If "Yes," complete Schedule J</i>			e, key	y em	nplo •	yee, o	rhıg	jhest comp	ensate • •	d employee	Yes	No No
	For any individual listed on line 1a, is the organization and related organizations of individual										om the		No
5	Did any person listed on line $1a$ receive services rendered to the organization? $\it I$									on or ir	ndividual for		No
Se	ction B. Independent Contracto												
1	Complete this table for your five highes compensation from the organization Re												
		(A) usiness address								Description	(B) on of services	Compe	
	otal number of independent contractors 100,000 of compensation from the orga		not lım	ıted t	o th	nose	listed	dabo	ove) who re	eceived	more than		

Form **990** (2015)

Part V		Statement o						
		Check if Schedu	ule O contains a respo	nse or note to any lii	(A)	(B)	(C)	(D)
					Total revenue	Related or	Unrelated	Revenue
						exempt	business	excluded from
						function revenue	revenue	tax under sections
								512-514
s £	1a	Federated camp	paigns 1a					
Contributions, Giffs, Grants and Other Similar Amounts	b	Membership du	es 1 b	1,379,752				
Grants mounts	c	Fundraising eve	ents 1 0					
øĒ.	ام ا		rations 1d					
<u>≅</u> 2:	d	_						
g, Ē	e	Government grants	s (contributions) 1 €	·				
<u> </u>	f	All other contribution	ons, gifts, grants, and 1f	•				
₹ E			ons included in lines					
Contributions, Giffs, and Other Similar A	g	1a-1f \$	ons included in lines					
Ö	h	Total. Add lines	s 1a-1f	· · · •	1,379,752			
				Business Code				
Ξ.	2a	TOURNAMENTS		713910	399,106	399,106		
eg.	b	100111111111111111111111111111111111111		713910	339,100	399,100		
Program Service Revenue								
Š	C							
) S	d							
E E	e							
2 2 2 2 2 3	f	All other progra	im service revenue					
Ě	g	Total. Add lines	s 2a – 2f		399,106			
	3		ome (including divider		·			
		and other simila	aramounts)		23,236	23,236		
	4	Income from inves	tment of tax-exempt bond	proceeds	0			
	5	Royalties			0			
			(ı) Real	(II) Personal				
	6a	Gross rents	102,432					
	ь	Less rental						
	c	expenses Rental income	102,432					
		or (loss)	·		100 100		100 100	
		or (loss)	me or (loss)	_	102,432		102,432	
	d	or (loss) Net rental incor	·	▶ (II) Other	102,432		102,432	
		or (loss) Net rental incor Gross amount from sales of	me or (loss)	_	102,432		102,432	
	d	or (loss) Net rental incor Gross amount	me or (loss)	_	102,432		102,432	
	d 7a	or (loss) Net rental incor Gross amount from sales of assets other than inventory	me or (loss)	_	102,432		102,432	
	d	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and	me or (loss)	_	102,432		102,432	
	d 7a b	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses	me or (loss)	_	102,432		102,432	
	d 7a b	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss)	me or (loss) (i) Securities	(II) Other	102,432		102,432	
άı.	d 7a b c	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	me or (loss) (I) Securities	(II) Other			102,432	
nue	d 7a b c	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss)	me or (loss) (i) Securities	(II) Other			102,432	
venue	d 7a b c	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (los Gross income fi events (not incl	me or (loss) (i) Securities s)	(II) Other			102,432	
Revenue	d 7a b c	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (los Gross income fi events (not incl \$ of contributions	me or (loss) (i) Securities s) from fundraising luding reported on line 1c)	(II) Other			102,432	
ier Revenue	d 7a b c	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (los Gross income fi events (not incl	me or (loss) (i) Securities s) from fundraising luding reported on line 1c)	(II) Other			102,432	
Other Revenue	d 7a b c d 8a	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (los Gross income fi events (not incl \$ of contributions See Part IV, line	me or (loss) (i) Securities (ii) Securities (iii) Securities (iii) Securities (iv) Securities (iv) Securities	(II) Other			102,432	
Other Revenue	d 7a b c d 8a	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (los Gross income fi events (not incl \$ of contributions See Part IV, lin Less direct ex	me or (loss) (I) Securities (S) rom fundraising luding reported on line 1c) te 18	(II) Other			102,432	
Other Revenue	d 7a b c d 8a	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (los incl fevents (not incl fevents (not incl fevents) See Part IV, lin Less direct ex Net income or (Gross income fi	me or (loss) (i) Securities (ii) Securities (is) (is) (is) (is) (is) (is) (ioss) from fundraising fundraising from gaming activities	(II) Other	0		102,432	
Other Revenue	d 7a b c d 8a	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (los included in the sales expenses for events (not included in the sales expenses) Gross income from the sales expenses for contributions for contributions for contributions for expense	me or (loss) (i) Securities (ii) Securities (iii) Securities (iii) Securities (iii) Securities (iii) Securities (iii) Securities	(II) Other	0		102,432	
Other Revenue	d 7a b c d 8a b c	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (los Gross income fi events (not incl \$ of contributions See Part IV, lin Less direct ex Net income or (Gross income fi See Part IV, lin	me or (loss) (i) Securities (ii) Securities (iii) Securit	(II) Other	0		102,432	
Other Revenue	d 7a b c d 8a b c	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (loss) Gross income fievents (not incless) \$ of contributions See Part IV, lin Less direct ex Net income or (Gross income field from the see of t	me or (loss) (i) Securities (ii) Securities (iii) Securities (iii) Securities (iii) Securities (iii) Securities (iiii) Securities (iiii) Securities (iiii) Securities (iiii) Securities (iiiii) Securities (iiii) S	(II) Other	0		102,432	
Other Revenue	d 7a b c d 8a b c	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (los Gross income frevents (not incl \$ of contributions See Part IV, lin Less direct ex Net income or (Gross income free Part IV, lin Less direct ex Net income or (me or (loss) (i) Securities (ii) Securities (iii) Securities (iii) Securities (iiii) Securities (iiii) Securities (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	(II) Other	0		102,432	
Other Revenue	d 7a b c d 8a b c	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (loss) Gross income fievents (not incless) \$ of contributions See Part IV, lin Less direct ex Net income or (Gross income field from the see of t	me or (loss) (i) Securities (ii) Securities (iii) Securities (iii) Securities (iiii) Securities (iiii) Securities (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	(II) Other	0		102,432	
Other Revenue	d 7a b c d 8a b c	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (los Gross income fi events (not incl \$ of contributions See Part IV, lin Less direct ex Net income or (Gross income fi See Part IV, lin Less direct ex Net income or (Gross sales of i	me or (loss) (i) Securities (ii) Securities (iii) Securities (iii) Securities (iiii) Securities (iiii) Securities (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	(II) Other	0		102,432	
Other Revenue	d 7a b c d 8a b c 9a b c	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (loss) Ret gain or (loss) See Part IV, lin Less direct ext Net income or (Gross income fif see Part IV, lin Less direct ext Net income or (Gross sales of income or (me or (loss) (i) Securities (ii) Securities (iii) Securities (iiii) Securities (iiii) Securities (iiii) Securities (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	(II) Other	0		102,432	
Other Revenue	d 7a b c d 8a b c 10a	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (los Gross income frevents (not incl \$ of contributions See Part IV, lin Less direct ex Net income or (Gross income free Part IV, lin Less direct ex Net income or (Gross sales of ireturns and allos	me or (loss) (i) Securities (ii) Securities (iii) Securities (iii) Securities (iiii) Securities (iiii) Securities (iiii) Securities (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	events	0		102,432	
Other Revenue	d 7a b c d 8a b c 10a	or (loss) Net rental incor Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (los Gross income frevents (not incl \$ of contributions See Part IV, lin Less direct ex Net income or (Gross income free Part IV, lin Less direct ex Net income or (Gross sales of ireturns and allos	me or (loss) (i) Securities (i) Securities (ii) Securities (iii) Securities (iiii) Securities (iiii) Securities (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	events	0		102,432	
Other Revenue	d 7a b c d 8a b c 9a b c 10a b c	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (loss) Net gain or (loss) See Part IV, lin Less direct expenses Gross income from the income or (Gross sales of income or (Gross sales of income or (Gross sales of income or (Gross cost of gross cost of gross cost of gross cost of gross income or (Gross cost of gross c	me or (loss) (i) Securities (i) Securities (ii) Securities (iii) Securities (iiii) Securities (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	events	0	15,995	102,432	
Other Revenue	d 7a b c d 8a b c 9a b c 10a b c	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (loss) Net gain or (loss) See Part IV, lin Less direct extended from the control of the control	me or (loss) (i) Securities (i) Securities (ii) Securities (iii) Securities (iiii) Securities (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	events	0	15,995	102,432	
Other Revenue	d 7a b c d 8a b c 10a b c	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (loss) Net gain or (loss) See Part IV, lin Less direct extended from the control of the control	me or (loss) (i) Securities (i) Securities (ii) Securities (iii) Securities (iiii) Securities (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	events	0	15,995	102,432	
Other Revenue	d 7a b c d 8a b c 9a b c 10a b c	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (loss) Net gain or (loss) See Part IV, lin Less direct extended from the control of the control	me or (loss)	events	0	15,995	102,432	
Other Revenue	d 7a b c d 8a b c 9a b c 10a b c	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (loss) Net gain or (loss) See Part IV, linical s	me or (loss) (i) Securities (ii) Securities (iii) Securities (iiii) Securities (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	events	0 0 0 15,995	15,995	102,432	
Other Revenue	d 7a b c d 8a b c 9a b c 10a b c 11a b c d	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Net gain or (loss) Net gain or (loss) See Part IV, lin Less direct expenses Gross income from the income or (Gross sales of income or (Gross income or (Gross sales of income or (Gross	me or (loss) (i) Securities (ii) Securities (iii) Securities (iiii) Securities (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	events	0	15,995	102,432	

	990 (2015)				Page 1 (
	Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns				
	Check if Schedule O contains a response or note to any line in t	his Part IX	(B)	(C)	
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	55,716	55,716		
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	135,021	135,021		
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	370,389	370,389		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	14,606	14,606		
9	Other employee benefits	52,735	52,735		
10	Payroll taxes	53,072	53,072		
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
C	Accounting	0			
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	5,553	5,553		
12	Advertising and promotion	18,806	18,806		
13	Office expenses	26,752	26,752		
14	Information technology	8,539	8,539		
15	Royalties	0			
16	Occupancy	54,415	54,415		
17	Travel	7,403	7,403		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	3,900	3,900		
20	Interest	80,164	80,164		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	25,147	25,147		
23	Insurance	8,867	8,867		
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)				
а	EVENTS & EDUCATION	199,734	199,734		
b	OGA CHAMPIONSHIPS	180,471	180,471		
c	HANDICAPPING	109,973	109,973		
d	INTERNET	27,638	27,638		
e	All other expenses	36,540	36,540		
25	Total functional expenses. Add lines 1 through 24e	1,475,441	1,475,441	0	
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 ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2015) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 12,660 34,153 1 1 642.212 2 528.870 2 Savings and temporary cash investments . . . Pledges and grants receivable, net 0 3 3 134.815 4 154.220 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 0 7 0 7 34,796 8 30,332 8 18,655 31,689 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis 844,065 10a Complete Part VI of Schedule D b 10b 201.057 653,305 10c 643.008 Less accumulated depreciation 11 Λ 11 12 0 12 Investments—other securities See Part IV, line 11 0 13 13 Investments—program-related See Part IV, line 11 . 14 47,271 14 36,671 15 3,167,178 15 2.990.146 16 **Total assets.**Add lines 1 through 15 (must equal line 34) . 4,597,550 16 4,562,431 175,710 17 **17** 218,190 Accounts payable and accrued expenses 18 18 19 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 1,540,000 1,400,000 23 Secured mortgages and notes payable to unrelated third parties . 23 24 24 Unsecured notes and loans payable to unrelated third parties . . . 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 1,715,710 26 1,618,190 26 **Total liabilities.**Add lines 17 through 25 . . . Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete Balance lines 27 through 29, and lines 33 and 34. 2.881.840 2.944.241 27 27 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 ž 33 2,881,840 2,944,241 33 Total liabilities and net assets/fund balances 4.597.550 34 4.562.431

Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		•		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,9	920,521
2	Total expenses (must equal Part IX, column (A), line 25)	2		1.4	475,441
3	Revenue less expenses Subtract line 2 from line 1	3			445,080
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			881,840
5	Net unrealized gains (losses) on investments	5			301,040
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-;	382,679
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		2,9	944,241
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. ୮</u>
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
ь	Were the organization's financial statements audited by an independent accountant?		2b		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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DLN: 93493259010086

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

OMB No 1545-0047

Inspection

If the organization answered "Yes" on 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" on 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" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** OREGON GOLF ASSOCIATION 23-2743830 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 ☐ Yes Was a correction made? If "Yes." describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from filing organization's contributions received funds If none, enter -0and 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.

ŀ	e C (Form 990 or 990-EZ) 2015						Page 2
1	CI-A Complete if the organization is under section 501(h)).	exempt under	section 501(c)(3) and f	ilec	l Form 5768	(election
c	ck 🕨 🗆 if the filing organization belongs to an af		list in Part IV ea	ch affiliated g	roup	member's name	e, address, EIN,
c	expenses, and share of excess lobbying ck		l" provisions app	olv			
	Limits on Lobbying			·· /		(a) Filing	(b) Affiliated
	(The term "expenditures" means					organization's totals	group totals
	al lobbying expenditures to influence public opinions	on (grass roots					
	oring) al lobbying expenditures to influence a legislative	e body (direct lobb	yıng)				
t	al lobbying expenditures (add lines 1a and 1b)						
h	ner exempt purpose expenditures						
t	al exempt purpose expenditures (add lines 1c and	d 1d)					
b	bying nontaxable amount Enter the amount from	the following table	ın both columns				
t	he amount on line 1e, column (a) or (b) is:	e lobbying nontaxal	ole amount is:				
t	over \$500,000 20°	% of the amount on li	ne 1e				
_	r \$500,000 but not over \$1,000,000 \$1	00,000 plus 15% of the	e excess over \$500 (000			
		75,000 plus 10% of the	<u> </u>				
		25,000 plus 5% of the		<u></u>			
		,000,000					
_	h \$17,000,000 \$1,	,000,000					
a	ssroots nontaxable amount (enter 25% of line 1f	·)					
h	otract line 1g from line 1a If zero or less, enter -0) -					
b	otract line 1f from line 1c If zero or less, enter -0	-					
	here is an amount other than zero on either line 1 orting section 4911 tax for this year?	h or line 11, did the	organization file	Form 4720			
,,	orting section 4911 tax for this year?		Г	Yes	_ N	o	
			<u>'</u>		,		
	4-Year Aver	aging Period U	Inder section	501(h)			
	(Some organizations that made a sec	tion 501(h) el	ection do not	have to co			e five
	columns below. See the	separate instr	uctions for li	nes 2a thro	oug	h 2f.)	
	Lobbying Expend	itures During	4-Year Avera	ging Perio	d		
	Calendar year (or fiscal year beginning in)	(a)2012	(b) 2013	(c) 2014		(d) 2015	(e) Total
2	bbying nontaxable amount						
_	, , ,				\dashv		
	bbying ceiling amount						
_	50% of line 2a, column(e))				\dashv		
o	otal lobbying expenditures						
_					十		
r	assroots nontaxable amount						
0	50% of line 2a, column(e)) stal lobbying expenditures						

Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	ЮТ			1 0	ige S
_		(6	a)		(b)	
For e activ	rach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying rity.	Yes	No	/	4 moun	t
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	103				
а	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	O ther 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			1		
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?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	01(c)(5),	or s	ectio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2	Yes	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		Νo
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I line 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 expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
C	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 excess 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				

Part IV Supplemental Information

Return Reference

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Explanation

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DLN: 93493259010086

OMB No 1545-0047

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.

	Revenue Service	Information about Schedule D (Form 990) and its instructions is at <u>www.</u>	irs.gov/form990.	Inspection
	ne of the organi			Employer identif	
UKE	GON GOLF ASSOCIA	ALLON		23-2743830	
Pa	rt I Organ	izations Maintaining Donor	Advised Funds or Other Similar	Funds or Accour	nts.
	Comple	ete if the organization answere	ed "Yes" on Form 990, Part IV, line 6.		
	Total numbe	er at end of year	(a) Donor advised funds	(b)Funds and o	other accounts
2		value of contributions to (during			
3	year) Aggregate v	value of grants from (during year)			
4		value at end of year			
5	Did the organiz	zation inform all donors and donor a	dvisors in writing that the assets held in d	onor advised	 ☐ Yes ☐ No
5	Did the organizused only for c	zation inform all grantees, donors, a	he organization's exclusive legal control? and donor advisors in writing that grant fund benefit of the donor or donor advisor, or for		Yes No
Par	tIII Conse	rvation Easements. Comple	te if the organization answered "Yes"	<u>' on Form 990, Par</u>	t IV, line 7.
L	Preservation Protection	conservation easements held by th on of land for public use (e g , recre of natural habitat on of open space		an historically import a certified historic st	
2	•	s 2a through 2d If the organization I he last day of the tax year	neld a qualified conservation contribution i		vation the End of the Year
а	Total number o	of conservation easements		2a	the thu of the real
b		restricted by conservation easeme	nts	2b	
c		servation easements on a certified		2c	
d	Number of cons) acquired after 8/17/06, and not on a	2d	
3	Number of cons	servation easements modified, trar	nsferred, released, extinguished, or termina	ated by the organizati	on during the
	tax year ►				
4	Number of stat	es where property subject to conse	ervation easement is located ►		
5		nization have a written policy regard enforcement of the conservation e	ding the periodic monitoring, inspection, ha asements it holds?		Yes
5	Staff and volun year	teer hours devoted to monitoring, i	nspecting, handling of violations, and enfo	rcing conservation ea	sements during the
,	A mount of expe	——— enses incurred in monitoring, inspe	ecting, handling of violations, and enforcing	ı conservatıon easem	ents during the vear
,	► \$				· ,
3		servation easement reported on lir ion 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of s		Yes
•	balance sheet,		s conservation easements in its revenue a of the footnote to the organization's financ sements		
ar			tions of Art, Historical Treasures ed "Yes" on Form 990, Part IV, line 8.		ır Assets.
la	works of art, hi	storical treasures, or other similar	AS 116 (ASC 958), not to report in its rev assets held for public exhibition, education note to its financial statements that descri	n, or research in furth	
b	works of art, hi		AS 116 (ASC 958), to report in its revenues assets held for public exhibition, education these items		
(i) Revenue inclu	uded on Form 990, Part VIII, line 1		► \$	
(ii	i) _{Assets includ}	ed in Form 990, Part X		► \$	
2	If the organizat	tion received or held works of art, h	istorical treasures, or other similar assets FAS 116 (ASC 958) relating to these iten	for financial gain, pro	

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Part	1441	Organizations Maintaining (continued)	Collections of A	rt, His	torical	Trea	sures, (or Ot	ther Similar <i>F</i>	\sse	ts	
		the organization's acquisition, acce tion items (check all that apply)	ession, and other reco	ords, cl						se of i	ts	
а	ГР	ublic exhibition		d	Lo	an or e	xchange ¡	progra	ams			
b	Г s	cholarly research		е	┌ ot	her						
c	ГР	reservation for future generations										
4	Provid Part X	de a description of the organization's (III	s collections and exp	laın hov	w they fur	ther th	e organız	atıon's	s exempt purpos	e in		
	asset	g the year, did the organization solic s to be sold to raise funds rather tha	an to be maintained a							s 「	- No	
Part	EIV.	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		Form	990, Pai	rt IV, l	lıne 9, oı	r rep	orted an amou	nt on	Form 99	} 0,
		organization an agent, trustee, cus led on Form 990, Part X?	todıan or other ıntern	nediary	for contr	ribution	s or othe	rasse	ets not r Ye :	s 「	- No	
b	If"	Yes," explain the arrangement in Pa	ort XIII and complete	the fol	lowing ta	ble			An	nount		
c		inning balance	·		J			1c				_
d	A do	ditions during the year					•	1d				_
e	Dıs	tributions during the year						1e				
f	End	ling balance						1f				
2a	Did th	ie organization include an amount or	n Form 990, Part X, Iı	ne 21,	for escro	worcu	Istodial ad	ccoun	t liability? \(Ye :	s 「	No	
b	If"Ye	s," explain the arrangement in Part	XIII Check here if th	ne expl	anation h	as bee	n provide	d ın Pa	art XIII		Г	-
Par	t V	Endowment Funds. Complete	te ıf the organızatı	on ans	wered "	Yes" t	o Form 9	990,	Part IV, line 10).		_
			(a)Current year	(b) Pr	or year	b (c)	Two years t	oack ((d)Three years back	(e)	our years b	ack
1a	Begir	ining of year balance				_						
b	Conti	ributions										
c	Net II losse	nvestment earnings, gains, and										
d	Grant	s or scholarships										
e		r expenditures for facilities rograms										
f	Admi	nistrative expenses										
g		fyear balance										
2		de the estimated percentage of the d	current vear end bala	nce (lır	ie 1a. col	umn (a)) held as					
		designated or quasi-endowment 🕨	,		9,		,,					
		anent endowment -										
c	Temp	orarily restricted endowment Feercentages on lines 2a, 2b, and 2c s	should agual 100%									
За	A re th	nere endowment funds not in the pos ization by		zatıon	that are h	neld an	d admınıs	tered	for the	Γ	Yes No	_
	(i) un	related organizations					•		3	a(i)		_
		lated organizations							<u>-</u>	a(ii)		_
		s" on 3a(II), are the related organiza								3b		_
		the in Part XIII the intended uses o		ndowm	ent funds							
Part	. VI	Land, Buildings, and Equiporal Complete of the organization a		orm 9	90. Part	TV. lır	ne 11a.S	See Fo	orm 990. Part	X. lın	e 10.	
		Description of property	noncrea res to r		(a) ost or othe (investme	r basıs	(b) Cost or oth) ner bas	Accumulated	<u> </u>	(d)Book val	ue
1a ∣	and				(,	<u> </u>	611,37	8	+	611	,378
		gs						,_,	1	\dashv		
		old improvements		.				4,85	8 4,.	524		334
		nent		.				227,82		-	31	,296
e 0	ther									\top		

643,008

(a) Description of security or category (including name of security)		(b) Book value	(c) Method of valuati Cost or end-of-year mark	
(1)Financial derivatives				
2)Closely-held equity interests 3)Other				
5,6 thei				
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)	+			
The street of the organization answered 'Complete if the organization answered'	Yes' on Form 99	0, Part IV, line 11c. _{Se}	ee Form 990. Part X. line 1	3.
(a) Description of investment		(b) Book value	(c) Method of valuati	on
			Cost or end-of-year mark	et value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	P			
Part IX Other Assets. Complete if the organization		ı Form 990, Part IV, lıne		e 15
(a) Descrip (1) INVESTMENT IN OGA PROPERTIES	otion		(b) Book value	162,146
(2) INVESTMENT IN ST OGAGC				828,000
Fotal. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the organ				990,146
See Form 990, Part X, line 25.		·	Ture 14, mile 11e or 11m	
1. (a) Description of liability	(b) Book value	e		
Federal income taxes				
		_		
		<u> </u>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)		\dashv		

Par		enue per Audited Financial Station answered 'Yes' on Form 990,		e per Return	
1	·	apport per audited financial statements	•	1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on i	nvestments	2a		
b	Donated services and use of facili	ities	2b		
c	Recoveries of prior year grants .		2c		
d	Other (Describe in Part XIII) .		2d		
e	Add lines 2a through 2d			2e	
3	Subtract line $2e$ from line 1			3	
4	Amounts included on Form 990, P	Part VIII, line 12, but not on line 1			
а	Investment expenses not include	d on Form 990, Part VIII, line 7b .	4a		
b	Other (Describe in Part XIII) .		4b		
c	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c.	(This must equal Form 990, Part I, line	212)	5	
Part		enses per Audited Financial Station answered 'Yes' on Form 990,		ses per Returi	1.
1		dited financial statements		1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25			
а		ities	2a		
b	Prior year adjustments		2b		
С	Otherlosses		2c		
d	Other (Describe in Part XIII) .		2d		
e	Add lines 2a through 2d			2e	
3	Subtract line $2e$ from line 1			3	
4	Amounts included on Form 990, P	art IX, line 25, but not on line 1:			
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	. 4a		
b	Other (Describe in Part XIII) .		4b		
c	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4	k. (This must equal Form 990, Part I, li	ne 18)	. 5	
Pari	XIII Supplemental Inform	mation			
Prov Part	ide the descriptions required for Par	t II, lines 3, 5, and 9, Part III, lines 1aes 2d and 4b, and Part XII, lines 2d and			dditional
	Return Reference	Explanation			

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2015

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(Form 990)

Department of the

Treasury

DLN: 93493259010086

OMB No 1545-0047

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

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

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

Open to Public Inspection

internal Revenue Service							
Name of the organization						Employer identific	ation number
OREGON GOLF ASSOCIATION						23-2743830	
Part I General Inform	ation on Grants	and Assistance				·	
 Does the organization main the selection criteria used Describe in Part IV the organization 	to award the grants ganization's procedu	or assistance? res for monitoring the i		United States			ΓYes ΓΝ
			omestic Governments. (dditional space is needd		ization answered "Yes" (on Form 990, Part IV, line	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OREGON JUNIOR GOLF (1) FUND INC 2840 HAZELNUT DRIVE WOODBURN,OR 97071	94-3091689	501(C)(3)	40,716	0			TO PROMOTE AND ADVANCE JUNIOR GOLF IN OREGON AND SW WASHINGT
							+
							+
							+
							+
							+
							+
Enter total number of sectiEnter total number of other		-				. .	1

Selleddie I (Form 550) 2015					raye a					
Grants and Other Assistance to Domestic Individuals. Complete If the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed										
(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistanc					

Peturn Pefer		Evolunation
Part IV	Supplemental 1	Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Schedule I (Form 990) 2015

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DLN: 93493259010086

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2015

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization OREGON GOLF ASSOCIATION

Employer identification number

23-2743830

990 Schedule O, Supplemental Information

Return Reference	Explanation
Client Note 1	Client Note 1 - NOTE TO FORM 990-T-THE GROSS RENTAL INCOME FROM THE CONTROLLED ORGANIZATION IS EXEMPT UNDER CODE SECTION 512(B)(13)(E)
Form 990, Part III, Line 4d Other Program Services Description	OTHER PROGRAM SERVICES 4 MEASURED AND RATED 11 AND 31 GOLF COURSES, RESPECTIVELY
Form 990, Part VI, Line 11b Form 990 Review Process	THE ORGANIZATION'S FORM 990 IS REVIEWED BY THE SENIOR DIRECTOR OF FINANCE
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	THE EXECUTIVE DIRECTOR'S SALARY IS DETERMINED AFTER AN ANNUAL REVIEW CONDUCTED BY THE EXECUTIVE COMMITTEE OF THE BOARD
Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	THE EXECUTIVE DIRECTOR'S SALARY IS DETERMINED AFTER AN ANNUAL REVIEW CONDUCTED BY THE EXECUTIVE COMMITTEE OF THE BOARD
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	NO DOCUMENTS MADE AVAILABLE TO THE PUBLIC
Other Changes In Net Assets Or Fund Balances - Other Decreases	INCOME FROM SUBSIDIARY = -\$382679

DLN: 93493259010086

OMB No 1545-0047

2015

Open to Public

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

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

Related Organizations and Unrelated Partnerships

► Attach to Form 990.

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

Inspection

OREGON GOLF ASSOCIATION				Employer	identific	cation number		
				23-2743	830			
Part I Identification of Disregarded Entities Comple	ete if the organization a	answered "Yes" or	n Form 990, Pa	rt IV, line 33.				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	С	(f) Direct controlling entity		
					-			
					1			
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the	zations Complete ıf th ne tax year.	e organization ans	swered "Yes" o	on Form 990, P	art IV, l	line 34 because it	had on	е
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sec	tion (e) Public charity (if section 50		(f) Direct controlling entity	Section (13) co en	(g) n 512(t ontrolle itity?
(1)OREGON JUNIOR GOLF FUND INC 2840 HAZELNUT DRIVE	PROMOTION AND ADVANCE OF JUNIOR GOLF	OR	501C3	SCH A, PART			Yes Yes	No
WOODBURN, OR 97071 94-3091689						N/A	\perp	\perp
							+	-
							+	
							+	
For Paperwork Reduction Act Notice, see the Instructions for Form 990).	Cat No 501:	35Y	1		Schedule R (Forr	n 990) 2	2015

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 9	90, Part IV, lı	ıne 34
	because it had one or more related organizations treated as a partnership during the tax year.		

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop alloca	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	nging	(k) Percentage ownership
				314)			Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section (b)(i contro entil	n 512 13) olled ty?
(1)OGA GOLF COURSE INC 2850 HAZELNUT DRIVE WOODBURN, OR 97071 93-1117986	GOLF COURSE MAINTENANCE	OR	OREGON GOLF ASSOCIAT	C CORP	-300,474	3,391,350	100 000 %	Yes	No No

Part V	Transactions With Related Organizations Complete if the organization answer	red "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				١	⁄es	No				
1 During	he tax year, did the orgranization engage in any of the following transactions with one or more re	lated organizations lis	sted in Parts II-IV?								
a Rece	ipt of (i) interest, (ii)annuities, (iii)royalties, or(iv)rent from a controlled entity				1a		No				
b Gift,	grant, or capital contribution to related organization(s)				1b		No				
c Gıft,	grant, or capital contribution from related organization(s)				1c		No				
d Loar	f d Loans or loan guarantees to or for related organization(s)										
e Loans or loan guarantees by related organization(s)											
f Divid	ends from related organization(s)				1f		No				
g Sale	of assets to related organization(s)				1g		No				
h Purc	nase of assets from related organization(s)				1h		No				
i Exch	ange of assets with related organization(s)				1i		No				
j Leas	e of facilities, equipment, or other assets to related organization(s)				1j		No				
k leas	e of facilities, equipment, or other assets from related organization(s)				1k		No				
	rmance of services or membership or fundraising solicitations for related organization(s)				11		No				
	mance of services or membership or fundraising solicitations by related organization(s)				1m		No				
	ng of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No				
	ng of paid employees with related organization(s)				10		No				
- D	h				1n		No				
	bursement paid to related organization(s) for expenses				1p 1q		No				
q Kein	bursement paid by related organization(s) for expenses				-4						
r Othe	transfer of cash or property to related organization(s)				1r		No				
s Othe	r transfer of cash or property from related organization(s)				1s		No				
2 If the	answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	vered relationships	and transaction thresholds							
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount inv	olved					

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
											l	1	I

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2015