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 foundations)

▶ 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

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015

B Check if applicable
- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

C Name of organization
Ladies Professional Golf Association

% KATHRYN H MILTHORPE

Doing business as

Number and street (or P O box if mail is not delivered to street address) 100 International Golf Drive | Room/suite

City or town, state or province, country, and ZIP or foreign postal code
Daytona Beach, FL 321241092

D Employer identification number 75-0055465

E Telephone number (386) 274-6200

G Gross receipts $ 111,317,182

F Name and address of principal officer
KATHRYN H MILTHORPE
100 International Golf Drive
Daytona Beach, FL 321241092

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☐ 501(c)(3) ☑ 501(c) (6) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ www lpga com

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1950

M State of legal domicile FL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
TO PROMOTE WORLDWIDE INTEREST IN THE GAME OF WOMEN'S PROFESSIONAL GOLF

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	15
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	6
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	137
6	Total number of volunteers (estimate if necessary)	6	3,200
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	0	0
	9	Program service revenue (Part VIII, line 2g)	113,451,057	111,295,737
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,958	21,445
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	113,459,015	111,317,182
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	356,117	202,050
	14	Benefits paid to or for members (Part IX, column (A), line 4)	650,000	850,000
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	11,213,834	11,616,774
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	100,213,684	98,391,286
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	112,433,635	111,060,110
	19	Revenue less expenses Subtract line 18 from line 12	1,025,380	257,072
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	56,369,335	60,133,251
	21	Total liabilities (Part X, line 26)	44,970,438	48,477,282
	22	Net assets or fund balances Subtract line 21 from line 20	11,398,897	11,655,969

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** — 2016-11-15
Signature of officer — Date

KATHRYN H MILTHORPE CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Paul Hagge	Paul Hagge	2016-11-09		P00543988

Firm's name ▶ Grant Thornton LLP — Firm's EIN ▶

Firm's address ▶ 200 South Orange Avenue Suite 2050
Orlando, FL 32801 — Phone no (407) 481-5100

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . ☐

1 Briefly describe the organization's mission

TO PROMOTE WORLDWIDE INTEREST IN THE GAME OF WOMEN'S PROFESSIONAL GOLF PRIMARY ACTIVITIES INCLUDE SANCTIONING AND ADMINISTERING GOLF TOURNAMENTS AND PROVIDING EDUCATION AND CERTIFICATION OPPORTUNITIES FOR INDIVIDUALS IN THE GOLF INDUSTRY

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ including grants of $) (Revenue $ 109,231,331)

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

4b (Code) (Expenses $ including grants of $) (Revenue $ 1,712,967)

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

4c (Code) (Expenses $ including grants of $) (Revenue $ 351,439)

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

4d Other program services (Describe in Schedule O)

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

4e **Total program service expenses ▶**

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1		No
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
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *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			
a	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	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
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
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b	Yes	
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		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
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? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer 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		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 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		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		
26	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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, 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		No
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		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	705			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	137			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	Yes	
b	If "Yes," enter the name of the foreign country ▶KS See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
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				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

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

Section A. Governing Body and Management

					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	**1a**	15			
	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**	6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?			**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			**5**		No
6	Did the organization have members or stockholders?			**6**	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			**7a**	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			**7b**	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following					
a	The governing body?			**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?			**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*			**9**		No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review 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**	Yes	
13	Did the organization have a written whistleblower policy?	**13**	Yes	
14	Did the organization have a written document retention and destruction policy?	**14**	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	**16a**		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	**16b**		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶ CA

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records
▶KATHRYN H MILTHORPE 100 INTERNATIONAL GOLF DRIVE Daytona Beach, FL 32124 (386) 274-6200

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

Check if Schedule O contains a response 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) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

		(D)	(E)	(F)
1b	**Sub-Total** . . . . ▶			
c	**Total from continuation sheets to Part VII, Section A** . . . . ▶			
d	**Total (add lines 1b and 1c)** . . . . ▶	4,558,055	0	251,094

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 29

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization?*If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
Golf Channel, PO Box 281401 ATLANTA, GA 30384	television svcs	18,711,857
GGM International, 4741 N Artesian Ave CHICAGO, IL 60625	event ops	636,301
NBC Universal, PO Box 402971 ATLANTA, GA 30384	television svcs	408,073
Top Tier Sports Medicine, 751 Malibu Lane INDIATLANTIC, FL 32903	sports medicine	323,862
Symbiotic Consulting Group, 2701 NW 2nd Ave Ste 214 BOCA RATON, FL 33431	it SERVICES	220,692

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 7

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . ☐

Section	Line	Description			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations . . .	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
	g	Noncash contributions included in lines 1a-1f $						
	h	**Total.** Add lines 1a-1f . . . . ▶			0			
Program Service Revenue			Business Code					
	2a	TOURNAMENT REVENUE	711300		68,950,046	68,950,046		
	b	TELEVISION & MEDIA REVENUE	711300		28,716,383	28,716,383		
	c	CORPORATE SPONSORSHIPS	711300		7,950,885	7,950,885		
	d	MEMBERSHIP & OTHER INCOME	711300		5,326,984	5,326,984		
	e	EDUCATION/PROF DEV	711300		351,439	351,439		
	f	All other program service revenue						
	g	**Total.** Add lines 2a–2f . . . . ▶			111,295,737			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶			3,945			3,945
	4	Income from investment of tax-exempt bond proceeds . . ▶			0			
	5	Royalties . . . . ▶			0			
			(i) Real	(ii) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	c	Rental income or (loss)	0	0				
	d	Net rental income or (loss) . . . . ▶			0			
			(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory		17,500				
	b	Less cost or other basis and sales expenses		0				
	c	Gain or (loss)		17,500				
	d	Net gain or (loss) . . . . ▶			17,500			17,500
	8a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18 . .	a					
	b	Less direct expenses . . .	b					
	c	Net income or (loss) from fundraising events . . ▶			0			
	9a	Gross income from gaming activities See Part IV, line 19 . . .	a					
	b	Less direct expenses . . .	b					
	c	Net income or (loss) from gaming activities . . . ▶			0			
	10a	Gross sales of inventory, less returns and allowances .	a					
	b	Less cost of goods sold . .	b					
	c	Net income or (loss) from sales of inventory . . ▶			0			
		Miscellaneous Revenue	Business Code					
	11a							
	b							
	c							
	d	All other revenue						
	e	**Total.** Add lines 11a–11d . . . . . . ▶			0			
	12	**Total revenue.** See Instructions . . . . . . ▶			111,317,182	111,295,737		21,445

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	**(A)** Total expenses	**(B)** Program service expenses	**(C)** Management and general expenses	**(D)** Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	202,050			
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	850,000			
5 Compensation of current officers, directors, trustees, and key employees	4,558,045			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	5,617,192			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	178,117			
9 Other employee benefits	681,428			
10 Payroll taxes	581,992			
11 Fees for services (non-employees)				
a Management	0			
b Legal	330,122			
c Accounting	613,407			
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)	980,107			
12 Advertising and promotion	782,418			
13 Office expenses	157,012			
14 Information technology	0			
15 Royalties . .	0			
16 Occupancy	0			
17 Travel	2,356,508			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	0			
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	1,252,767			
23 Insurance	379,218			
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)				
a PRIZE MONEY	51,808,276			
b TOURNAMENT EXPENSE	7,776,848			
c TELEVISION & MEDIA	17,009,994			
d CORPORATE SPONSOR	13,075,684			
e All other expenses	1,868,925			
25 Total functional expenses. Add lines 1 through 24e	111,060,110			
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)				

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
Assets	1	Cash–non-interest-bearing		0	1	0
	2	Savings and temporary cash investments		18,442,101	2	18,667,368
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		7,516,864	4	10,002,737
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		0	5	0
	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		0	6	0
	7	Notes and loans receivable, net		7,500	7	0
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		1,499,183	9	2,414,924
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 12,302,644			
	b	Less accumulated depreciation	10b 7,362,240	4,563,515	10c	4,940,404
	11	Investments—publicly traded securities		19,024,657	11	13,315,636
	12	Investments—other securities See Part IV, line 11		3,523,694	12	9,131,693
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets		1,791,821	14	1,660,489
	15	Other assets See Part IV, line 11		0	15	0
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		56,369,335	16	60,133,251
Liabilities	17	Accounts payable and accrued expenses		10,862,371	17	9,271,696
	18	Grants payable		0	18	0
	19	Deferred revenue		11,559,716	19	16,758,257
	20	Tax-exempt bond liabilities		0	20	0
	21	Escrow or custodial account liability Complete Part IV of Schedule D		0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		0	23	0
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		22,548,351	25	22,447,329
	26	**Total liabilities.** Add lines 17 through 25		44,970,438	26	48,477,282
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		11,398,897	27	11,655,969
	28	Temporarily restricted net assets		0	28	0
	29	Permanently restricted net assets		0	29	0
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		11,398,897	33	11,655,969
	34	Total liabilities and net assets/fund balances		56,369,335	34	60,133,251

Part 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	111,317,182
2	Total expenses (must equal Part IX, column (A), line 25)	2	111,060,110
3	Revenue less expenses Subtract line 2 from line 1	3	257,072
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11,398,897
5	Net unrealized gains (losses) on investments	5	
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	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	11,655,969

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☑ 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 in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Michael Trager Chairman	3 0 0 0	X						0	0	0
Karen Jennings Director	2 0 0 0	X						0	0	0
Roberta Bowman Director	2 0 0 0	X						0	0	0
David Fay Director	2 0 0 0	X						0	0	0
Peter Carfagna Director	2 0 0 0	X						0	0	0
Peggy Mulligan Director	2 0 0 0	X						0	0	0
Vicki Goetze-Ackerman President/Player/Director	25 0 1 0	X		X				75,900	0	0
Laura Diaz Player/Director	5 0 0 0	X						27,106	0	0
Mariajo Uribe Player/Director	5 0 0 0	X						334,769	0	0
Katherine Kirk Player/Director	5 0 0 0	X						63,812	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Dewi Claire Schreefel Player/Director	5 0 0 0	X						48,376	0	0
Karin Sjodin Player/Director	5 0 0 0	X						21,398	0	0
Paige Mackenzie Player/Director	5 0 0 0	X						8,000	0	0
Michael Whan LPGA Commissioner	40 0 1 0	X		X				1,033,752	0	23,524
Dana Rader President T&CP/Member/Director	2 0 0 0	X		X				25,000	0	0
Kathryn Milthorpe CFO/Treasurer	40 0 2 0			X				292,960	0	23,030
Marian Moore CLO/Secretary	40 0 2 0			X				288,450	0	11,877
Jon Podany Chief Commercial Officer	40 0 0 0				X			433,250	0	23,407
Heather Daly-Donofrio Chief Tourn Ops Officer	40 0 0 0				X			241,230	0	17,836
Nancy Henderson Chief Teaching Officer	40 0 20 0				X			246,490	0	18,376

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Kraig Kann Chief Communications Officer	40 0 0 0				X			246,055	0	22,559
Michael Nichols CBO/Symetra Tour	40 0 0 0				X			258,250	0	22,727
Kelly Hyne VP LPGA Properties	40 0 0 0					X		191,353	0	11,697
Ricki Lasky VP Tournament Business Affairs	40 0 0 0					X		228,493	0	21,410
Brian Carroll Sr VP TV/New Media	40 0 0 0					X		186,318	0	20,014
David Lafrennie Sr Dir Corp Partnerships	40 0 0 0					X		156,068	0	15,305
Debbie Ridgeway VP Finance	40 0 0 0					X		151,025	0	19,332

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047
2015
Open to Public Inspection

Name of the organization
Ladies Professional Golf Association

Employer identification number
75-0055465

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

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

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

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶______________

4 Number of states where property subject to conservation easement is located ▶______________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶______________

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ $ ______________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ ______________

(ii) Assets included in Form 990, Part X ▶ $ ______________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ______________

b Assets included in Form 990, Part X ▶ $ ______________

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition **d** ☐ Loan or exchange programs

b ☐ Scholarly research **e** ☐ Other

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ **Yes** ☐ **No**

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ **Yes** ☐ **No**

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

			Amount
c	Beginning balance	**1c**	
d	Additions during the year	**1d**	
e	Distributions during the year	**1e**	
f	Ending balance	**1f**	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

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

		(a) Current year	**(b)** Prior year	**b (c)** Two years back	**(d)** Three years back	**(e)** Four years back
1a	Beginning of year balance					
b	Contributions					
c	Net investment earnings, gains, and losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

			Yes	No
	(i) unrelated organizations	**3a(i)**		
	(ii) related organizations	**3a(ii)**		
b	If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	**3b**		

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

Part VI **Land, Buildings, and Equipment.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	**(a)** Cost or other basis (investment)	**(b)** Cost or other basis (other)	**(c)** Accumulated depreciation	**(d)** Book value
1a Land		350,000		350,000
b Buildings		2,348,518	1,444,971	903,547
c Leasehold improvements				
d Equipment		591,619	520,162	71,457
e Other		9,012,507	5,397,107	3,615,400
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . . . ▶				4,940,404

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) MERRILL LYNCH MONEY MARKET A/C	9,131,693	F
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶	9,131,693	

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* . . . . ▶	

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
Federal income taxes	0
MEMBERS' DEFERRED RETIREMENT BENEFITS	22,447,329
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	22,447,329

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	111,148,075
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	-151,607		
e	Add lines **2a** through **2d**			2e	-151,607
3	Subtract line **2e** from line **1**			3	111,299,682
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b	17,500		
c	Add lines **4a** and **4b**			4c	17,500
5	Total revenue Add lines **3** and **4c.**(This must equal Form 990, Part I, line 12)			5	111,317,182

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	110,891,003
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	-169,107		
e	Add lines **2a** through **2d**			2e	-169,107
3	Subtract line **2e** from line **1**			3	111,060,110
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	111,060,110

Part XIII Supplemental Information

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

Return Reference	Explanation
Schedule D, Part X, Line 2	FIN 48 (ASC 740) FOOTNOTE INCOME TAXES - THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAX UNDER PROVISIONS OF SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE AND FROM STATE INCOME TAXES UNDER SIMILAR PROVISIONS OF THE FLORIDA INCOME TAX CODE THE ASSOCIATION IDENTIFIES AND EVALUATES UNCERTAIN TAX POSITIONS, IF ANY, AND RECOGNIZES THE IMPACT OF UNCERTAIN TAX POSITIONS FOR WHICH THERE IS A LESS THAN MORE-LIKELY-THAN-NOT PROBABILITY OF THE POSITION BEING UPHELD WHEN REVIEWED BY THE RELEVANT TAXING AUTHORITY SUCH POSITIONS ARE DEEMED TO BE UNRECOGNIZED TAX BENEFITS AND A CORRESPONDING LIABILITY IS ESTABLISHED ON THE STATEMENT OF FINANCIAL POSITION THE ASSOCIATION HAS NOT RECOGNIZED A LIABILITY FOR UNCERTAIN TAX POSITIONS IF THERE WERE AN UNRECOGNIZED TAX BENEFIT, THE ASSOCIATION WOULD RECOGNIZE INTEREST ACCRUED RELATED TO UNRECOGNIZED TAX BENEFITS IN INTEREST EXPENSE AND PENALTIES IN OPERATING EXPENSES THE ASSOCIATION'S REMAINING OPEN TAX YEARS SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE INCLUDE THE YEARS ENDED DECEMBER 31, 2011 THROUGH 2015

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation
Schedule D, Part XI, Line 4B	GAIN ON SALE OF ASSETS OTHER THAN INVENTORY $17,500
Schedule D, Part XII, Line 2D	INVESTMENT LOSS INCLUDED SEPARATELY FOR FINANCIAL STATEMENT PRESENTATION PURPOSES BUT NET FOR TAX PURPOSES $(151,607) GAIN ON SALE OF ASSETS OTHER THAN INVENTORY $17,500

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Information about Schedule F (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
Ladies Professional Golf Association

Employer identification number
75-0055465

Part I General Information on Activities Outside the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	East Asia and the Pacific			Program Services	Golf Competition	95,624
(2)	Europe (Including Iceland and Greenland)			Program Services	Golf Competition	349,549
(3)	North America			Program Services	Golf Competition	47,623
(4)						
(5)						
3a	Sub-total					492,796
b	Total from continuation sheets to Part I					
c	**Totals** (add lines 3a and 3b)					492,796

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.**
Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶

3 Enter total number of other organizations or entities . . . . ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☑ No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)* ☐ Yes ☑ No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☐ Yes ☑ No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☑ No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☑ No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)* ☐ Yes ☑ No

Additional Data

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

Part V **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
Ladies Professional Golf Association

Employer identification number
75-0055465

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ **Yes** ☐ **No**

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 6

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 28

Part III **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) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

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

Return Reference	Explanation
Schedule I, Part I, Line 2	THE LADIES PROFESSIONAL GOLF ASSOCIATION TOURNAMENT PLAYERS ELECT TO DONATE ALL PRO AM REVENUE RECEIVED BY THE LPGA FROM TOURNAMENT SPONSORS TO THE LPGA FOUNDATION THE LADIES PROFESSIONAL GOLF ASSOCIATION MAKES SURE THAT ALL TRANSFERS ARE USED FOR PROPER PURPOSES AND ARE NOT OTHERWISE DIVERTED FROM THE INTENDED USE ALL OTHER GRANTS ARE DONATIONS TO OUTSIDE ORGANIZATIONS

Additional Data

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

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
The LPGA Foundation 100 International Golf Drive Daytona Beach, FL 32124	59-3085528	501(C)(3)	119,000				Donation
Daytona Regional Chamber PO Box 2676 Daytona Beach, FL 32115	59-0215990	501(c)(6)	9,000				Donation
World Golf Foundation One World Golf Place St Augustine, FL 32092	59-2998925	501(C)(3)	22,716				Donation

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
United Way of Volusia County 3747 W International Speedway Blvd Daytona Beach, FL 32124	59-1099774	501(C)(3)	7,000				Donation

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
Ladies Professional Golf Association

Employer identification number
75-0055465

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☑ First-class or charter travel ☑ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
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 ☑ Compensation committee ☑ Independent compensation consultant ☐ Form 990 of other organizations ☑ Written employment contract ☑ Compensation survey or study ☑ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c		No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	5a		
b	Any related organization? If "Yes," on line 5a or 5b, describe in Part III	5b		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	6a		
b	Any related organization? If "Yes," on line 6a or 6b, describe in Part III	6b		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on 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

(A) Name and Title	**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
See Additional Data Table							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference	Explanation
SCHEDULE J, PART II(B)(III)	Compensation for the following board member was related to tournament PRIZE WINNIGS RECEIVED IN CONJUNCTION WITH COMPETING IN LPGA TOURNAMENTS AND PROFESSIONAL SERVICES MARIAJO URIBE

Additional Data

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

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1 Mariajo UribePlayer/Director	(i)	0	0	334,769	0	0	334,769	0
	(ii)	0	0	0	0	- 0	- 0	0
1 Michael Whan LPGA Commissioner	(i)	675,000	358,752	0	0	23,524	1,057,276	0
	(ii)	0	0	0	0	- 0	- 0	0
2 Kathryn Milthorpe CFO/Treasurer	(i)	238,000	54,960	0	0	23,030	315,990	0
	(ii)	0	0	0	0	- 0	- 0	0
3 Jon Podany Chief Commercial Officer	(i)	350,000	83,250	0	0	23,407	456,657	0
	(ii)	0	0	0	0	- 0	- 0	0
4 Heather Daly-Donofrio Chief Tourn Ops Officer	(i)	200,700	40,530	0	0	17,836	259,066	0
	(ii)	0	0	0	0	- 0	- 0	0
5 Nancy Henderson Chief Teaching Officer	(i)	205,900	40,590	0	0	18,376	264,866	0
	(ii)	0	0	0	0	- 0	- 0	0
6 Kraig Kann Chief Communications Officer	(i)	200,700	45,355	0	0	22,559	268,614	0
	(ii)	0	0	0	0	- 0	- 0	0
7 Michael Nichols CBO/Symetra Tour	(i)	210,000	48,250	0	0	22,727	280,977	0
	(ii)	0	0	0	0	- 0	- 0	0
8 Kelly Hyne VP LPGA Properties	(i)	170,000	21,353	0	0	11,697	203,050	0
	(ii)	0	0	0	0	- 0	- 0	0
9 Ricki Lasky VP Tournament Business Affairs	(i)	200,000	28,493	0	0	21,410	249,903	0
	(ii)	0	0	0	0	- 0	- 0	0
10 Brian Carroll Sr VP TV/New Media	(i)	163,320	22,998	0	0	20,014	206,332	0
	(ii)	0	0	0	0	- 0	- 0	0
11 David Lafrennie Sr Dir Corp Partnerships	(i)	140,000	16,068	0	0	15,305	171,373	0
	(ii)	0	0	0	0	- 0	- 0	0
12 Debbie Ridgeway VP Finance	(i)	132,000	19,025	0	0	19,332	170,357	0
	(ii)	0	0	0	0	- 0	- 0	0
13 Marian Moore CLO/Secretary	(i)	239,000	49,450	0	0	11,877	300,327	0
	(ii)	0	0	0	0	- 0	- 0	0

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Schedule L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ.
▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
Ladies Professional Golf Association

Employer identification number
75-0055465

Part I **Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . ▶ $

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

Part II **Loans to and/or From Interested Persons.**
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

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

Part III **Grants or Assistance Benefiting Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
(1) Vicki Goetze-Ackerman	Player/BOD	75,900	Professional services		No
(2) Paige MacKenzie	Player/BOD	8,000	Prize winnings/prof svcs		No
(3) Katherine Kirk	Player/BOD	63,812	Prize winnings/prof svcs		No
(4) Karin Sjodin	Player/BOD	21,398	Prize winnings/prof svcs		No
(5) Mariajo Uribe	Player/BOD	334,769	Prize winnings		No
(6) Laura Diaz Inc	Player/BOD	19,487	Prize winnings/prof svcs		No
(7) Dewi Claire Schreefel	Player/BOD	48,376	Prize winnings/prof svcs		No
(8) Dana Rader	Member/BOD	25,000	Professional services		No

Part V Supplemental Information
Provide additional information for responses to questions on Schedule L (see instructions)

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

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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.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
Ladies Professional Golf Association

Employer identification number
75-0055465

Return Reference	Explanation
MEMBERS OR STOCKHOLDERS	Form 990, Part VI, Line 6 The members of the Ladies Professional Golf Association are the tournament players and Teaching and club professional members

Return Reference	Explanation
MEMBERS OR STOCKHOLDERS WHO MAY ELECT	Form 990, Part VI, Line 7a The reserved powers of the Ladies Professional Golf Association permit the voting membership to elect one or more members of the governing body of the Ladies Professional Golf Association

Return Reference	Explanation
DECISIONS SUBJECT TO APPROVAL	Form 990, Part VI, Line 7b The material decisions of management are subject to the approval by the board of directors of the Ladies Professional Golf Association

Return Reference	Explanation
FORM 990 REVIEW PROCESS	Form 990, Part VI, Line 11b The Form 990 was provided to the Ladies Professional Golf Association Board of Directors for informational purposes prior to the filing of the return

Return Reference	Explanation
CONFLICT OF INTEREST POLICY MONITORING & ENFORCEMENT	Form 990, Part VI, Line 12c Board members are provided with a conflict of interest reporting form on an annual basis on which to report and disclose any real or potential conflict of interest or ethical issue to the LPGA The obligation to report such conflicts or issues is ongoing, therefore board members are required to report any change in circumstances whenever they occur during any calendar year Each conflict of interest reporting form shall be submitted confidentially for review to the Chief Legal Officer, who is empowered to resolve any conflict of interest or ethical issue that may compromise a board member's ability to fulfill her or his fiduciary obligations to the Ladies Professional Golf Association In the event that a conflict of interest or ethical issue cannot be satisfactorily resolved by the LPGA Chief Legal Officer, the matter shall be referred to the LPGA Governance Committee which shall seek to resolve the matter Any matter that cannot be resolved by the above procedures shall be reported to the board of directors for resolution

Return Reference	Explanation
WHISTLEBLOWER POLICY	Form 990, Part VI, Line 13 THE LADIES PROFESSIONAL GOLF ASSOCIATION HAS A WRITTEN WHISTLEBLOWER POLICY THAT APPLIES ONLY TO EMPLOYEES, NOT THE BOARD OF THE DIRECTORS

Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	Form 990, Part VI, Line 15a The Human Resources Committee of the Board of Directors is charged with recommending the appointment, conducting performance reviews and determining the compensation of the Commissioner This recommendation is based on the following methods independent compensation consulting, comparable industry knowledge, and market surveys The Human Resources Committee recommends to the entire Board of Directors the Commissioner's base salary, benefits and performance bonus, if certain goals are met

Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	Form 990, Part VI, Line 15b The Commissioner is charged with conducting performance reviews of officers and key employees to determine base salary, benefits and performance bonus, if goals are met The criteria used is determined from the following methods independent compensation consulting, comparable industry knowledge, and market surveys

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 18	The Ladies Professional Golf Association makes its Form 1023, 990, 990-T available for public inspection via U S mail upon request

Return Reference	Explanation
Form 990, PART VI, SECTION C, LINE 19	No governing documents, conflict of interest policy or financial statements are available to the public

Return Reference	Explanation
BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS	Schedule L, Part IV (A) NAME OF PERSON VICKI GOETZE-ACKERMAN (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION $75,900 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN VICKI GOETZE-ACKERMAN AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PROFESSIONAL SERVICES AS LPGA TOUR PRESIDENT (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON PAIGE MACKENZIE (B) RELATIONSHIP BETWEEN PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION $8,000 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN PAIGE MACKENZIE AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PRIZE WINNINGS RECEIVED FOR COMPETING IN LPGA TOURNAMENTS AND PROFESSIONAL SERVICES RENDERED (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON KATHERINE KIRK (B) RELATIONSHIP BETWEEN PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION $63,812 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN KATHERINE KIRK AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PRIZE WINNINGS RECEIVED FROM COMPETING IN LPGA TOURNAMENTS AND PROFESSIONAL SERVICES RENDERED (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON KARIN SJODIN (B) RELATIONSHIP BETWEEN PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION $21,398 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN KARIN SJODIN AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PRIZE WINNINGS RECEIVED FROM COMPETING IN LPGA TOURNAMENTS AND PROFESSIONAL SERVICES RENDERED (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON MARIAJO URIBE (B) RELATIONSHIP BETWEEN PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION $334,769 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN MARIAJO URIBE AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PRIZE WINNINGS RECEIVED FROM COMPETING IN LPGA TOURNAMENTS (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON LAURA DIAZ INC (B) RELATIONSHIP BETWEEN PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION $19,487 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN LAURA DIAZ INC AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PRIZE WINNINGS RECEIVED FROM COMPETING IN LPGA TOURNAMENTS AND PROFESSIONAL SERVICES RENDERED (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON DEWI CLAIRE SCHREEFEL (B) RELATIONSHIP BETWEEN PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION $48,376 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN DEWI CLAIRE SCHREEFEL AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PRIZE WINNINGS RECEIVED FROM COMPETING IN LPGA TOURNAMENTS AND PROFESSIONAL SERVICES RENDERED (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON DANA RADER (B) RELATIONSHIP BETWEEN PERSON AND ORGANIZATION MEMBER/BOD (C) AMOUNT OF TRANSACTION $25,000 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEEN DANA RADER AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PROFESSIONAL SERVICES AS T&CP NATIONAL PRESIDENT AND EVALUATOR (E) SHARING OF ORGANIZATION REVENUES? = NO

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
Ladies Professional Golf Association

Employer identification number

75-0055465

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) FGTA LLC 100 International Golf Drive Daytona Beach, FL 32124 26-0507044	Develop Tour	FL	-262,479	3,221,743	LPGA
(2) LPGA Tourn Prop One LLC 100 International Golf Drive Daytona Beach, FL 32124 27-1317091	Golf Events	FL	10,718,633	14,160,579	LPGA
(3) LPGA Asia LLC 100 International Golf Drive Daytona Beach, FL 32124 46-2753637	Marketing	FL	221,866	9,828	LPGA

Part II **Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1)THE LPGA FOUNDATION 100 International Golf Drive Daytona Beach, FL 32124 59-3085528	JRGOLF/SCHOL	FL	501(c)(3)	11, Type I	NA		No
(2) Daytona Beach Golf Charities 100 International Golf Drive Daytona Beach, FL 32124 59-3214096	GOLF EVENTS	FL	501(c)(3)		na		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

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

			Yes	No
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity . . .	**1a**		No
b	Gift, grant, or capital contribution to related organization(s) . . .	**1b**	Yes	
c	Gift, grant, or capital contribution from related organization(s) . . .	**1c**		No
d	Loans or loan guarantees to or for related organization(s) . . .	**1d**	Yes	
e	Loans or loan guarantees by related organization(s) . . .	**1e**		No
f	Dividends from related organization(s) . . .	**1f**		No
g	Sale of assets to related organization(s) . . .	**1g**		No
h	Purchase of assets from related organization(s) . . .	**1h**		No
i	Exchange of assets with related organization(s) . . .	**1i**		No
j	Lease of facilities, equipment, or other assets to related organization(s) . . .	**1j**		No
k	Lease of facilities, equipment, or other assets from related organization(s) . . .	**1k**		No
l	Performance of services or membership or fundraising solicitations for related organization(s) . . .	**1l**		No
m	Performance of services or membership or fundraising solicitations by related organization(s) . . .	**1m**		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .	**1n**	Yes	
o	Sharing of paid employees with related organization(s) . . .	**1o**	Yes	
p	Reimbursement paid to related organization(s) for expenses . . .	**1p**		No
q	Reimbursement paid by related organization(s) for expenses . . .	**1q**	Yes	
r	Other transfer of cash or property to related organization(s) . . .	**1r**		No
s	Other 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 covered relationships and transaction thresholds

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1) The LPGA Foundation	b	119,000	Gift
(2) The LPGA Foundation	d	691,951	Loan
(3) The LPGA Foundation	n	28,779	Reimbursement
(4) The LPGA Foundation	o	587,250	Reimbursement
(5) The LPGA Foundation	q	3,004,719	Reimbursement

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

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

Return Reference	Explanation