Short Form Return of Organization Exempt From Income Tax

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

2016

	-	ê	▶ Do no	t enter social security r	numbers on this form	as it may be	made public			Open to Public			
		of the Treasury		ation about Form 990-E		-		1 /1)b	Inspection			
		enue Service	ar year, or tax year beginn			06/30/1		7		rest editable lightes and by a first of the			
	Check if a		C Name of organization	mg 07/01/10	, and ending	00/00/0		ם	Employe	er identification number			
	Address c	1	New Hampshire	Golf Cours	se			-					
H	Name cha	-	Superintender						22-	2501176			
H	Initial retui	-	Number and street (or P O box if r				Room/suite	E		ne number			
	Final retur	n/terminated	PO Box 784					-		-674-1163			
\dashv	Amended	return	City or town, state or province, coul	ntry, and ZIP or foreign postal	code			F	F Group Exemption				
H	Application	n pending	Auburn	ľ	NH 03032				Number				
G	Accoun	ting Method	X Cash Accrual	Other (specify) ▶	•		H	Check I	C==	he organization is not			
ı	Websit	•	. NHGCSA. COM	· · · · · · · —			_	required		Schedule B			
J	Tax-exe		eck only one) — X 501(c)(3				Z, or 990-PF)						
		f organization	Corporation) 501(c)() 4 (ir	nsert no) 4947(a ociation	Other	•		_				
		_	to line 9 to determine gross re		I	or if total asse	ts						
(Par	rt II, colur	nn (B) below) a	re \$500,000 or more, file Form	990 instead of Form 990	-EZ				▶ \$	36,421			
P	art I	Reven	ue, Expenses, and C	nanges in Net As	sets or Fund B	alances (s	see the inst	truction	s for Pa	rt I)			
			f the organization used S							X			
	1		gifts, grants, and similar amounts						1				
	2	Program ser	vice revenue including gover	nment fees and contra	cts				2	17,245 11,395			
	3	Membership	dues and assessments										
	4	Investment in	ncome						4	92			
	5a	Gross amou	nt from sale of assets other t	han inventory		5a							
	b	Less cost or	other basis and sales exper	ises		5b			Harita Labert				
	c	Gain or (loss) f	rom sale of assets other than inv	entory (Subtract line 5b fro	om line 5a)				5c				
	6	Gaming and	fundraising events										
	a	Gross incom	e from gaming (attach Scheo	rom gaming (attach Schedule G if greater than									
re	ļ	\$15,000)		6a									
Revenue	b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) 6b 7,689											
βè													
	භ	sum of such	gross income and contribution										
	Cc	Less direct of	expenses from gaming and f	undraising events		6c	4	,537					
	ANNET	Net income of	or (loss) from gaming and fur	ndraising events (add li	nes 6a and 6b and s	subtract							
	2	line 6c)				i i			6d	3,152			
	7a	Gross sales	of inventory, less returns and	l allowances		7a							
	b	Less cost of	goods sold			7b							
ġ	Ę c		or (loss) from sales of invent	ory (Subtract line 7b fro	om line 7a)				7с				
	8 ر		ie (describe in Schedule O)					_	. 8	21 004			
- 	9		ue. Add lines 1, 2, 3, 4, 5c, 6					<u> </u>	9	31,884			
			ımılar amounts paid (list in S	·					10	3,680			
ڇ	11	•	to or for members	R	ECEIVED				11				
es	12		er compensation, and emplo		part non a see and manager of second	7 <u>0</u>			12	<u> </u>			
Sus	13		fees and other payments to	independent coritractor	AY 2 1 2018	181			13	6,100			
Expenses 2107	14		rent, utilities, and maintenan	افغا	AY 2 1 2018	RS-OS			14				
Ш	1 . •	= :		The state of the s									
	16	•	ses (describe in Schedule O)		GDEN, UT				16	27,102			
	17		ses. Add lines 10 through 16						17	36,882			
ş	18		eficit) for the year (Subtract I	18	-4,998								
Net Assets	19		r fund balances at beginning		olumn (A)) (must aç	ree with				70 201			
t As		-	igure reported on prior year's		d= 0\				19	78,291			
Š	20	=	es in net assets or fund balar						20	73,293			
	21	Net assets o	r fund balances at end of vea	ir Combine lines 18 th	rouan 20				21	13,293			

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2016)

New Hampshire Golf Co	ourse		00TT\0		raye 2
Part II Balance Sheets (see the instructions for P	art II)				
Check if the organization used Schedule O to	respond to any	question in this Part II			
•		(A) Be	ginning of year	L	(B) End of year
22 Cash, savings, and investments			78,291	22	73,293
23 Land and buildings			0	23	
24 Other assets (describe in Schedule O)			0	24	
25 Total assets			78,291	25	73,293
26 Total liabilities (describe in Schedule O)			0	26	0
27 Net assets or fund balances (line 27 of column (B) must agre	e with line 21)		78,291	27	73,293
Part III Statement of Program Service Accom	plishments (se	e the instructions for F	Part III)		
Check if the organization used Schedule O to	respond to any	question in this Part III	X		Expenses
What is the organization's primary exempt purpose?				(Re	quired for section
See Schedule O	·			501	(c)(3) and 501(c)(4)
Describe the organization's program service accomplishments for ea	•			orga	anizations, optional for
as measured by expenses. In a clear and concise manner, describe		ed, the number of		othe	ers)
persons benefited, and other relevant information for each program to	title			ļ	
28 To publish a quarterly newsletter to inform:	members of cur	rent procedures			
in golf course and turf maintenance that is	beneficial to	the public			
			,		_
(Grants \$) If this amount includes f	foreign grants, chec	k here		28a	3,484
29 Conducts meetings for its members and attended	s conferences]]	
			,,,,,,		
(Grants \$) If this amount includes f	oreign grants, chec	k here		29a	19,086
30 Grants scholarships to area college students					
(Grants \$ 3,680) If this amount includes f	oreign grants, chec	k here	•	30a	3,680
31 Other program services (describe in Schedule O)					
(Grants \$) If this amount includes f	oreign grants, chec	k here	<u> </u>	31a	
32 Total program service expenses (add lines 28a through 31a)			<u> </u>	32	26,250
Part V List of Officers, Directors, Trustees, and Key En			sated — see the ii	nstructio	ns for Part IV)
Check if the organization used ochedule of to respo	(b) Average	(c) Reportable	(d) Health ber		
(a) Name and title	hours per week	compensation (Forms W-2/1099-MISC)	contributions to e benefit plans,	mployee and	(e) Estimated amount of other compensation
	devoted to position	(If not paid, enter -0-)	deferred compe		other compensation
EJ Chea					
President	3.00	0		0	0
Ryan Green			i		
Vice President	3.00	0		0	0
Rob Horn					
Treasurer	3.00	0		0	0
Bernard Chase	}		ì		
Secretary	3.00	0		0	0
Tom DiFonzo					
Director	1.00	0		_0	0
John Gabbeitt			}		
Director	1.00	0		0	0
Jerry Lachance					
Director	1.00	0		0	0
J. Barrie Robertson					
Director	1.00	0		0	o
Steve Wilson					
Director	1.00	0		Q	o
Bob Doran				•	
Director	1.00	o		0	0
Dave Ousterhout					
Director	1.00	0		0	0
	 				
· · · · · · · · · · · · · · · · · · ·	<u> </u>				

A Cpage 3

P	Other Information (Note the Schedule A and personal benefit contract statement instructions for Part V) Check if the organization used Schedule O to respond to any		/		
		question in this r are v		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			'	
	detailed description of each activity in Schedule O		33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed	1			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the				v
25-	change on Schedule O (see instructions)	_	34		<u> </u>
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business	5	35a	x	
b	activities (such as those reported on lines 2, 6a, and 7a, among others)?	Schedule O	35a 35b	X	
C	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in S Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) not		330		
٠	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	.ice,	35c		x
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets		000_		
	during the year? If "Yes," complete applicable parts of Schedule N		36		x
37a		7a		Faller Faller	The second
b	Did the organization file Form 1120-POL for this year?		37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or we	re	in the second		4,44,48
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		38a		X
b		Bb		斯特斯	in in the second
39	Section 501(c)(7) organizations Enter				
а	Initiation fees and capital contributions included on line 9	9a			
b	Gross receipts, included on line 9, for public use of club facilities	9b		# # 1	
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			在7里。4月 15日 (2)	
	section 4911 ▶, section 4912 ▶, section 4955 ▶			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	The said
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	inmination 1
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year		401		v
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		40b	# 및	X
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed				
	on organization managers or disqualified persons during the year under sections 4912,				
_	4955, and 4958				
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization.		m 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	Hat.	ini g
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter			비 : 10년 대표 : 10년	Fair Fair
·	transaction? If "Yes," complete Form 8886-T		40e	SHi mana Ji	X
41	List the states with which a copy of this return is filed None				
42a	The organization's books are in care of ▶ Rob Horn	Telephone no ▶	603-53	3-2	761
	59 Old Greenfield Road				
	Located at ▶ Bennington NH	ZIP + 4 ▶	03442		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authorit	y over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account	nt)?	42b		X
	If "Yes," enter the name of the foreign country			ing and the second seco	142 574 1960 - 1
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank ar	nd			
_	Financial Accounts (FBAR)		40-	TELLE	X
С	At any time during the calendar year, did the organization maintain an office outside the United States?		42c		
43	If "Yes," enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here				
43	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 43			
	and once the amount of tax-exempt interest received of accided during the tax year	45		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be				
	completed instead of Form 990-EZ		44a	د کنگ اظال ست.	X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			1.0335 1.0335	en, Priver
	completed instead of Form 990-EZ		44b		X
С	Did the organization receive any payments for indoor tanning services during the year?		44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			THE L	
	explanation in Schedule O		44d		<u> </u>
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		45a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within th	е	7 4500 1460	BM	
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of		1726 7 (116) (16) (16) (17) (16) (16) (16) (17) (17) (17) (17) (17) (17) (17) (17) (17) (17) (17)		
	Form 990-EZ (see instructions)	 _	45b		X

	U-EZ (20	New	<u> </u>	GOLT (Course	22	25011	176			age 4
			age, directly or indirect			n behalf of or in op	position		46	Yes	No X
Part		Section 50 All section 50 50 and 51	1(c)(3) organizat 01(c)(3) organization organization used S	ions only ns must an	swer questions 47-			the tables for	lines		
		- 114, 124	··· ·		<u> </u>	<u> </u>				Yes	No
			age in lobbying activitie Schedule C, Part II	es or have a	section 501(h) electio	n in effect during th	ne tax		47	x	
	_		ool as described in sec			•			48		X
		•	e any transfers to an e	·	-	nization?			49		_X_
			organization a section in the organization's five hi	-		ther than officers.	directors, tru	stees, and kev	[.43	<u>- </u>	Ц
			ceived more than \$100	-							
		(a) Name and	title of each employee	·	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-	n contr	Health benefits butions to emplo enefit plans, and erred compensati	other co	ited amoi	
None	e		·				, den	этей сотренава	011		
										_	
_						-		<u> </u>			
_	-					-					
f To	otal num	ber of other em	nployees paid over \$10	00,000		•					
			e organization's five hi			contractors who ea	ch received	more than			
\$^			on from the organizatio						4-1-0		
		(a) Name and bu	siness address of each i	ndependent c	ontractor		(b) Type of se	ervice	(c) Comp	ensauor	
None	•										
					,, <u>.</u>						
					<u> </u>			-			
_											
d To	otal num	ber of other ind	lependent contractors	each receivir	ng over \$100,000	-					
52 D	id the or	ganization com	plete Schedule A? No t	te: All section	n 501(c)(3) organizatio	ons must attach a					
cc	ompleted	Schedule A							► X Ye	s	<u>No</u>
			e that I have examined to ation of preparer (other to						wiedge and belie	ef, it is	
<u> </u>			wer C. H				5	-/12/2	018		
Sign		Signature of office	.)	- 6	1	Dnog	Date	7000	C 11 0		
Here	▋	Type or print name	ne and title	T (,)	HORH	- Eastern	-cent	1 CC-ya	SURGE		
	Pni	nt/Type preparer's na			Preparer's signature			Date	heck of PT	IN	
Paid	Ab	by T Dawson	n, CPA	2	ubby T. Dawson,	CPA		1	-16 alaved	052587	1
Prepar		m's name	F. G. Brig					Firm's EIN		_	-
Use Or	nly Fin	m's address	98 Salmon								
			Manchester		03104			Phone no	603-66		40
May the	: IRS dis	cuss this return	with the preparer sho	wn above? S	See instructions				<u>▶</u> x		No
									Form 9	90-EZ	(2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust

▶ Attach to Form 990 or Form 990-EZ.

Reason for Public Charity Status (All organizations must complete this part) See instructions

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

Name of the organization

Part I

2

New Hampshire Golf Course Superintendents Association

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

Employer Identification number 22-2501176

4		A medical res	search orga	anization opera	ated in	conjunctio	on with a hospital d	escribed in	section	170(b)(1)(A)(ɪɪi). Enter the hospital's nam	е,		
		city, and state	Э								1		
5		An organizati	on operate	d for the bene	fit of a	college or	university owned	or operated	by a gove	ernmental unit described in			
		section 170	b)(1)(A)(iv	r). (Complete F	Part II)								
6		A federal, sta	te, or local	government o	r gover	nmental	unit described in s e	ection 170	(b)(1)(A)(v).			
7		•		mally receives '0(b)(1)(A)(vi)			, ,	m a goverr	mental ur	nit or from the general public			
8		A community	trust desc	ribed in sectio	n 170(b)(1)(A)(v	رر). (Complete Part	II)					
9	\Box	An agricultura	al research	organization o	describ	ed in sec t	tion 170(b)(1)(A)(ı	x) operated	in conjur	nction with a land-grant college			
		or university university	or a non-la	nd grant colleg	je of ag	riculture ((see instructions)	Enter the na	ame, city,	and state of the college or			
10	X			,	` '					s, membership fees, and gross no more than 33 1/3% of its			
		support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2) . (Complete Part III.)											
11		An organizati	on organizi	ed and operate	ed exclu	usively to	test for public safe	ty See sec	tion 509(a)(4).			
12		An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g											
	а			•				• •		anization(s), typically by giving			
	_				•				_	ctors or trustees of the			
		supportin	g organiza	tion You mus	t com	olete Par	t IV, Sections A a	nd B					
	b									d organization(s), by having			
		control or management of the supporting organization vested in the same persons that control or manage the supported											
	organization(s) You must complete Part IV, Sections A and C.												
	c Type III functionally integrated A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E.												
	d									vith its supported organization(s)			
										uirement and an attentiveness			
		requirem	ent (see in:	structions) Yo	u mus	t comple	te Part IV, Section	ns A and D	, and Par	₹ V.			
	е									Type I, Type II, Type III			
			-			nctionally	integrated supporti	ng organiza	ation				
	f	_	•	ported organiz									
	g	Provide the fo	ollowing inf	ormation abou	t the su	ipported o	organization(s)			,			
(ı		e of supported		(II) EIN			pe of organization		organization	1) Amount of		
	org	ganization	ĺ				(see instructions)		ur governing ment?	1	r support (see istructions)		
						450.0	(coo mon zonomo))	Yes	No		,		
(A)					+			1	 		-		
(/~/					İ				ľ				
(B)								_	<u> </u>				
(C)													
						-			<u> </u>				
(D)													
(E)													
					T. 1 - 50				Tail of The 1				
Tota	ı			things of the second		hallan ing			Really Solution				
		work Reductio	n Act Notic	e, see the Insti	ructions	for Form	990 or 990-EZ	- 301 or case, 100, 250		Schedule A (Form 99	0 or 990-EZ) 2016		

Sche	edule A (Form 990 or 990-EZ) 2016 Ne	w Hampshir	e Golf Co	ourse	22	-2501176	Page 2
P	Support Schedule for C (Complete only if you che Part III If the organization	Organizations D ecked the box or	escribed in Son line 5, 7, or 8	ections 170(b) of Part I or if the	ne organization	failed to qualify	
Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f)√Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						·
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	/(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support Add lines 7 through 10		T. TIME				
12	Gross receipts from related activities, etc	(see instructions)				12	
13	First five years If the Form 990 is for the	organization's first,	second, third, fourt	h, or fifth tax year a	as a section 501(c)(3)	
	organization, check this box and stop her	e /					_ _
Sec	ction C. Computation of Public S	upport Percent	age				·
14	Public support percentage for 2016 (line 6	column (f) divided t	y line 11, column	(f))		14	%
15	Public support percentage from 2015 School	edule A, Part II, line	14			15	<u>%</u>
16a	33 1/3% support test—2016. If the organ	ization did not check	the box on line 13	3, and line 14 is 33	1/3% or more, chec	ck this	
	box and stop here. The organization quali		_				▶ _
b	33 1/3% support test—2015. If the organ	iization did not check	ca box on line 13 o	or 16a, and line 15	is 33 1/3% or more,	check	
	this box and stop here . The organization of	qualifies as a publicly	y supported organi	zation			▶ _
17a	10%-facts-and-circumstances test—20	16. If the organization	n did not check a b	oox on line 13, 16a	, or 16b, and line 14	l is	
	10% or more, and if the organization meet						
	Part VI how the organization meets the "fa	cts-and-circumstand	es" test. The organ	nization qualifies as	a publicly supporte	ed	
	organization						▶ _
b		ŭ				ne	
	15 is 10% or more and if the organization Explain in Part VI how the organization me					ly	▶ □
	supported organization						

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2016

18

Partill Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II if the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support	quality ander th	TO LOGIS HOLOGIE	elew, please e	omproto r art ii	/	
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	19,630	18,045	17,577	8,019		63,271
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	30,829				36,329	171,704
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	50,459	49,455	51,044	47,688	36,329	234,975
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b						
с 8	Public support. (Subtract line 7c from line 6)						234,975
Sec	tion B. Total Support	1 12 11 11 HR 2 11 1961, G. 344	later and the factor of the transferred	ene -1 (1.0000000)	[400 (7 kg 0.1 6268 at (25 1)	A THE TRANSPORT OF THE PARTY OF	234,915
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	50,459	49,455	51,044	47,688	36,329	234,975
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	176	118	129	80	92	595
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	176	118	129	80	. 92	595
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11,	50.505	40 577	E1 100	47.760	26 401	025 570
14	and 12) First five years If the Form 990 is for the	50 , 635		51,173		36,421	235,570
	organization, check this box and stop here		second, mild, loan				.
Sec	tion C. Computation of Public Su	ipport Percent	age				
15	Public support percentage for 2016 (line 8,	column (f) divided l	by line 13, column ((f))		15	99 75%
16	Public support percentage from 2015 Sche					16	99.70%
	tion D. Computation of Investme						 -
17	Investment income percentage for 2016 (lii		•	olumn (f))		17	%_
18	Investment income percentage from 2015	•				18	%_
19a	33 1/3% support tests—2016 If the organ 17 is not more than 33 1/3%, check this bo						▶ X
b	33 1/3% support tests—2015. If the organ						
	line 18 is not more than 33 1/3%, check this	•	•		,		▶ □
20	Private foundation. If the organization did	not check a box on	ı lıne 14, 19a, or 19	b, check this box a	nd see instructions		▶ [

Part IV Supporting

Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

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10b		
		EZ) 2016

Par	tily Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	21745		Alas I a succession
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		 -
Soct	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		L
Sect	ion B. Type I Supporting Organizations		Van	
1	Did the directors, trustees, or membership of one or more supported organizations have the newer to		Yes	No.
'	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	ed Dehid Maadl	aŭ e i Til Hadii ŝie
2	Did the organization operate for the benefit of any supported organization other than the supported	Basi	tem 'Itala	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2	ii nijiubunbini	10.1 . 1.1.1911 T
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	5.7		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		since:	
	or management of the supporting organization was vested in the same persons that controlled or managed			Parini.
	the supported organization(s)	1_		<u> </u>
Secti	on D. All Type III Supporting Organizations			
		tanti, PF-1	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	建 加。		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the			
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	. 1555A	1577#3.57 1577#3.57
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2	achies de la	المار المارك السا
•	the organization maintained a close and continuous working relationship with the supported organization(s)	2	a salamana b	12.5454 P.12
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3	. sa efer in "	سنداد شاشد
Secti	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instruction	ns)		
		1		
2 /	Activities Test Answer (a) and (b) below.	The Hardina	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined		Page Philip	4 - 1
	that these activities constituted substantially all of its activities	2a	42 (B) (2 (P)	of craning
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		THE	P.E.
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		toka:	
	reasons for the organization's position that its supported organization(s) would have engaged in these		<u> </u>	
•	activities but for the organization's involvement	2b	こうない	
3 a	Parent of Supported Organizations <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		116	
а	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a	ande Hill e Zie	1560円 海州
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
D	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b	alanda Till Jaffa	
	a copposed organizations in 100, accombount are at the following on a fine organization in this logary	, 1		

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Part Value Type III Non-Functionally Integrated 509(a)(3) Supporting	Organizat	ions	age 0
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust of			
instructions. All other Type III non-functionally integrated supporting organizations	s must complet	e Sections A through E	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		,
4 Add lines 1 through 3	4		
5 Depreciation and depletion -	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or	ĺ		
maintenance of property held for production of income (see instructions)	6		ļ
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see	71 €1 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Topical Filming San Transfer	
instructions for short tax year or assets held for part of year)	5. Tri (14.1 24 Su 14.1		
Average monthly value of securities	1a		
b Average monthly cash balances	1b	· · · · · · · · · · · · · · · · · · ·	
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other	- F. W. 18.		
factors (explain in detail in Part VI)			
Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally integri		ipporting organization (see	· · · · · · · · · · · · · · · · · · ·
instructions)	· = · >P= · · · Ou		
matructions)			

	le A (Form 990 or 990-EZ) 2016 New Hampshire Golf		22-2501	1/6 Page 7
Pan		ipporting Organizati	ions (continuea)	
_Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes		·	
2	Amounts paid to perform activity that directly furthers exempt purposes of	supported		
	organizations, in excess of income from activity		 	
3	Administrative expenses paid to accomplish exempt purposes of supported			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6		····	
8	Distributions to attentive supported organizations to which the organization	n is responsive		
	(provide details in Part VI) See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	F		
		(1)	(ii)	(III)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
		united (1995), I have been green and continued by	Pre-2016	Amount for 2016
	Distributable amount for 2016 from Section C, line 6		[15] [16] [16] [16] [16] [16] [16] [16] [16	to decement annuality sets that production is offer than
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required-explain in Part VI) See			
	Instructions Executed distributions correspond if any to 2016	ACTION OF THE PROPERTY OF THE		
3	Excess distributions carryover, if any, to 2016		Care the control of the care and the care an	
a	[47] 水土 《《宋明祖代》《《宋明祖代》《《宋明》》《宋明》》《宋明》》《宋明》 《宋明代》 《宋明代		The property of the control of the c	Fig. 12. Compared to the compared of the compa
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	From 2015	Mitter Lit. Artegar of complete meter graphic telepolitics	Comment of the Commen	FOR THE PROPERTY OF THE PROPER
	Total of lines 3a through e		es, they a completely and a series	
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Carryover from 2011 not applied (see instructions)	n den dise Till and his College Analistate	THE THE RESERVE OF THE PARTY OF	
	Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2016 from	尼尔拉塞美罗福尼亚亚亚亚亚亚亚		Figure 1 to the second state of the second sta
4				
	Section D, line 7 \$ Applied to underdistributions of prior years		lander i jahringantaga za sejin er e tabini se	
	Applied to 2016 distributable amount	The second of th	The state of the s	-2-4-77 - 2 CTun 2-5-45-40 FP. 1-7-7-7-7 - 4
	Remainder Subtract lines 4a and 4b from 4	te ii ' - 11 ((nemperate nomen) (-	The state of the s	
5	Remaining underdistributions for years prior to 2016, if		ration of the plantage of the	1 12 15 14 15 15 15 15 15 15 15 15 15 15 15 15 15
5	any Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016 Subtract lines 3h			the and tradefile. It to always all the section is a distribution of the section of
О				
	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions	The second of th	minings, et al. 15 to the market and a same a feeting market and a feeting of the control of the	
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c	 「小心的漢字論:脚門的ではませている。」	print the second of the second	
8	Breakdown of line 7	propries and propries and propries of the pr	THE CONTRACTOR STREET	The property of the property o
a		Sale to the Committee of the Committee o	Broke 31 Jan 20 April 19 Sept 20 Sept 20 April 2	
	Excess from 2013		· · · · · · · · · · · · · · · · · · ·	The same of the sa
	Excess from 2014			1
	Excess from 2015	And the state of t	Proceedings of the control of the co	The state of the s
е	Excess from 2016	Talante Merital Trial of this and the ended to a gaing	Schedule	A (Form 990 or 990-EZ) 2016

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Department of the Treasury Internal Revenue Service

Complete if the organization is described below

Attach to Form 990 or Form 990-EZ.

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

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

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

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

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

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

<u>• S</u>	Section 501	(c)(4), (5), or (6) or	ganizations Complete	Part III				
Name	e of organiz		Hampshire G				1	tification number
			rintendents				22-25011	
							n 527 organizatio	n.
1			organization's direct an	d indirect political car	npaign activities in	Part IV (see instru	ictions for	
		of "political campaig	•				_	
2		,	penditures (see instruc	•			▶ \$	
3 [====================================			campaign activities (see		4: 504/-	\ <u>\</u>		
			ne organization is)(3)		
1		•	se tax incurred by the	· ·			▶ \$	
2		•	se tax incurred by orga	•			▶ \$	п., п.
3	,							Yes No
		rection made?						Yes No
2 1.1		escribe in Part IV			postion FO4/s	\	on 504(a)(2)	
			ne organization is				on 50 i(c)(s).	
1		amount directly exp	pended by the filing org	janization for section	527 exempt function	on	. .	
_	activities	1.60 61					▶ \$	
2		=	organization's funds c	contributed to other or	ganizations for sec	tion	> #	
•		pt function activities		d 0	- F 1120 DOL		▶ \$	
3		npt function expend	ditures Add lines 1 and	1 2 Enter here and o	1 FORM 1120-POL,		▶ ¢	
4	Ine 17b							
4 5	- · · · · · · · · · · · · · · · · · · ·							
3			For each organization		•	-	-	
			outions received that w					
		*	nd or a political action of		•	• •	· ·	
	as a sepai	(a) Nan		()		(c) EIN	T	(e) Amount of political
		(a) Nan	ile	'	b) Address	(c) EIN	(d) Amount paid from filing organization's	contributions received and
							funds If none, enter -0-	promptly and directly
								delivered to a separate political organization. If
								none, enter -0-
(1)								
(- /								
(2)								
` '								
(3)				_			-	
• •								
(4)								
 (5)								
-								
(6)								

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total				
2a Lobbying nontaxable amount		10	10						
b Lobbying ceiling amount (150% of line 2a, column(e))		The left of Early for the control of							
c Total lobbying expenditures									
d Grassroots nontaxable amount									
e Grassroots ceiling amount (150% of line 2d, column (e))									
f Grassroots lobbying expenditures									

Schedule C (Form 990 or 990-EZ) 2016

Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT filed h	-orm	5/68			
		(a)		(b)		
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Amo	unt		
 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 		X				
c Media advertisements?		x		HER HAND	Plate Sen	
d Mailings to members, legislators, or the public?		X				
e Publications, or published or broadcast statements?		X				
f Grants to other organizations for lobbying purposes?		X				
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X				
i Other activities?	х			4,	000	
J Total Add lines 1c through 1i		하네네네. ㅋ 하네네. 뭐 ㅋ 하네!! 뭐 ㅋ			000	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	in wide it that	X	SHEET OF CO	1+ 200 = 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
b If "Yes," enter the amount of any tax incurred under section 4912	[8] 11 - 28 [8] 11 - 28 [8] 11 - 28 [8] 12 - 28					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	, ea			High		
Part III A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), c	r se	ction			
	· ····			Yes	No	
1 Were substantially all (90% or more) dues received nondeductible by members?			1			
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2			
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior y	/ear?		3			
Part III-B Complete if the organization is exempt under section 501(c)(4), section		or se	ction		-	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "				3, is		
answered "Yes."						
Dues, assessments and similar amounts from members		_1				
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of						
political expenses for which the section 527(f) tax was paid).						
a Current year	ļ	2a				
b Carryover from last year		2b				
c Total		2c				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the			,			
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		第二 4				
5. Tayable amount of lobbying and political expenditures (see instructions)		5				

Part V Supplemental Information

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

Schedule C, Part IV, Additional Information

A payment was made to an advocacy and public affairs firm for lobbying activities.

Page 4

SCHEDULE O (Form 990 or 990-EZ)

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.

2016

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

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.

Open to Public

Name of the organization

New Hampshire Golf Course Superintendents Association Employer identification number

22-2501176

Form 990-EZ, Part I, Line 16 - Other Expenses

Description		Amount		
Expenses				
Meetings and conferences		\$	16,722	
Tournament conference		\$	1,400	
Insurance		\$	1,049	
Secretarial services		\$	6,967	
Miscellaneous		\$	964	
	Total	Ś	27,102	

Form 990-EZ, Part III - Primary Exempt Purpose

To further the science of golf course maintenance and related fields, including turf, soil, water, and other preservation and handling, including research and experimental activities.