

Form **990-EZ****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)

2017**Open to Public
Inspection**

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990EZ for instructions and the latest information.Department of the Treasury
Internal Revenue Service**A** For the 2017 calendar year, or tax year beginning

, 2017, and ending

, 20

B Check if applicable:☐ Address change☐ Name change**C** Name of organization**HARRY HURLEY IN THE MORNING GOLF OPEN**

Number and street (or P.O. box, if mail is not delivered to street address)

Room/suite

D Employer identification number**27-0861608**

E Telephone number

Part II Balance Sheets (see the instructions for Part II)Check if the organization used Schedule O to respond to any question in this Part II ☐

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	7359	22 6271
23 Land and buildings		23
24 Other assets (describe in Schedule O)		24
25 Total assets	7359	25 6271
26 Total liabilities (describe in Schedule O)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	7359	27 6271

Part III Statement of Program Service Accomplishments (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III ☐What is the organization's primary exempt purpose? CHARITABLE ORG IN METRO AC

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

		Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)
28	<u>SEE SCHEDULE O</u>	
(Grants \$ <u>40,100</u>) If this amount includes foreign grants, check here <input type="checkbox"/>		28a
29		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>		29a
30		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>		30a

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part 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		<input checked="" type="checkbox"/>
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		<input checked="" type="checkbox"/>
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		<input checked="" type="checkbox"/>
b If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		<input checked="" type="checkbox"/>
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		<input checked="" type="checkbox"/>
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		<input checked="" type="checkbox"/>
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0		
b Did the organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		<input checked="" type="checkbox"/>
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a Section 501(c)(2) organizations. Enter amount of tax imposed on the organization during the year under		

Section B - Minimum Asset Amount

(A) Prior Year

(B) Current Year

1 Aggregate fair market value of all non-exempt-use assets (see

- 46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		<input checked="" type="checkbox"/>

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI ☐

- 47 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

	Yes	No
47		<input checked="" type="checkbox"/>

GRANTS: PAGE 1, Line 10

Leukemia + Lymphoma Society \$500
528 Fellowship Road

Somers Point, NJ 08244

Atlantic City Rescue Mission #250.
2009 Bacharach Blvd.
Atlantic City, NJ 08401

New Jersey Broadcasters Assoc. \$1,000

Part II**Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under

F99 Harbor Trust 115 18724

Part III 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
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						
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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 514 taxes) from business						

Part IV **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

Yes	No
-----	----

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c 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 .		

Section B. Type I Supporting Organizations

	Yes	No
1 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.		
2 Did the organization operate for the benefit of any supported organization other than the supported 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.		

Section 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 or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (a) a written notice describing the type and amount of support provided during the calendar		

100 Medical Center Way

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete 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		

Venmar, NJ 08406

GILDA'S CURR S.J. \$1,000
700 New Road

Unwood, NJ 08221

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**Section 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 | |

528 Fellowship Fund

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Open to Public
Inspection

Name of the organization

HARRY HURLEY IN THE MORNING

GOLF
OPEN

Employer identification number

27-0861608

Pleasantville Police Foundation \$ 100

17 N. 1st Street

Pleasantville, NJ 08232

Dean Mandarzo Cancer found. \$ 250

P.O. Box 149

Somers Point, NJ 08244

Diabetes Training Camp \$ 250

Name of the organization

Employer identification number

LARRY HUBLEY IN THE MORNING GOLF 22-0811400

- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(iv)** operated in conjunction with a land-grant college

or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or

Section A. Public Support

Calendar year (or fiscal year beginning in) ►

1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . .

(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
62,581	44,420	55,726	47,997	50,314	260,928

Name of the organization

HARRY HURLEY IN THE MORNING GOLF OPEN

Employer identification number

27-0861608

Atlantic Prevention Resources \$1,000

626 N. Shore Road

Absecon, NJ 08201

The Northfield Mile \$200

2 Henry Drive

Northfield, NJ 08225

Atlantic County Toys 4 Kids \$1,000

P.O. Box 556

~~Spring Bank NJ 08211~~

Name of the organization

HARRY HURLEY IN THE MORNING GOLF OPEN

Employer identification number

27-0861608

New Jersey Broadcasters Assoc. \$1,000

348 Applegarth Road

Jamesburg, New Jersey 08831

Proposed P - 2017-2018 L

Name of the organization

HARRY HURLEY IN THE MORNING GOLF
OPEN

Employer identification number

27-0861608

Patrick Henry Center #1,000

14001 C #657

Centreville, VA 20121

TARA MILLER CANCER FOUND. #1,000

P.O. Box 3154

Margate, NJ 08402

Chuck's 3 on 3 #500

11 S. Somerset Avenue

Name of the organization	GOLF OPEN	Employer identification number
HARRY HURLEY IN THE MORNING		27-0861608

S.J. Basketball Summit, Inc. \$500
144 Laurel Avenue - Hammonton
Winslow Twp., NJ 08037

John R Elliott HERO Campaign \$500
P.O. Box 700
Somers Point, NJ 08244

FACES 4 AUTISM \$1,000
2900 Fire Road
Egg Harbor Twp., NJ 08244

Deborah Heart Foundation \$1,000
200 Trenton Road
Browns Mills, NJ 08015

Arthur Brown Foundation \$500
3123 Atlantic Ave. #201

Name of the organization HARRY HURLEY IN THE MORNING GOLF OPEN	Employer identification number 27-0861608
---	--

The Fund For Cape May \$500
200 Congress Place
at Beach Avenue
Cape May, NJ 08204

GRAND TOTAL GRANTS = \$ 40,100
GRANTS: PAGE 1, Line 10

— 9 —