Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information

Open to Public Inspection

ΔΕ	or the	2017 calendar year, or tax year beginning	and	dending			
			and	a enuing			
B c	heck if oplicable	C Name of organization			D Employer	r identificati	ion number
	Addres						
	_change	TN SECTION PGA OF AME	RICA				
L	Name change	Doing business as				62-086	3884
	Initial	Number and street (or P.O box if mail is not	delivered to street address)	Room/su	ite E Telephon	e number	
	Final	400 FRANKLIN RD	,		- 10.000.1011		0-7600
	/return/ termin		d ZID or foreign postal and	<u> </u>	G Gross receip		3,196,032.
	ated Ameno	City or town, state or province, country, all FRANKLIN, TN 37069-8			-		
	Jreturn ∃Applic	FRANKLIN, IN 5/009-0			H(a) Is this a	group retur	
	Jtion pendir	F Name and address of principal officer C±	ATTON HRUMADKA		for sub	ordinates?	Yes X No
		SAME AS C ABOVE		$\Delta \Box$	H(b) Are all sub	ordinates includ	led? Yes No
		empt status 501(c)(3) X 501(c) (6) (insert no.) 4947(a)(1)	(gr ()) 5	27 If "No,"	attach a list	(see instructions)
		e: ► TENNPGA.COM		,	H(c) Group e	exemption ni	umber 🕨
K F	orm of	organization: X Corporation Trust	Association	L Ye	ar of formation: 1	972 m St	ate of legal domicile: Th
	rt I	Summary					<u>-</u>
<u> </u>	1	Briefly describe the organization's mission or me	est significant activities SEE	SCHET	OULE O		
8	'	briefly describe the organization's mission of mi	ost significant activities <u>BBB</u>	DCIIDI	<u> </u>		
Activities & Governance		<u> </u>				 	
ē.		Check this box 🕨 📖 if the organization dis	·	osed of m	ore than 25% of	its net asset	
્રે	3	Number of voting members of the governing bo	dy (Part VI, line 1a)			3	13
8	4	Number of independent voting members of the	governing body (Part VI, line 1b)			4	11
ŝ	5	Total number of individuals employed in calenda	ır year 2017 (Part V, line 2a)			5	137
ŧΙ	6	Total number of volunteers (estimate if necessa	v)			6	100
ŧ		Total unrelated business revenue from Part VIII,	• •			7a	1,900.
⋖		Net unrelated business taxable income from Fo	• • •			7b	0.
		vet difference business taxable income from to	11 330-1, line 34	Ī	Dries Vee		
		Control of the contro		-	Prior Yea	0.	Current Year 66,500
e		Contributions and grants (Part VIII, line 1h)		-	1 054		<u> </u>
Revenue		Program service revenue (Part VIII, line 2g)		ļ	1,954,		1,887,732.
ا ۾	10	Investment income (Part VIII, column (A), lines 3	, 4, and 7d)			274.	47,060.
	11	Other revenue (Part VIII, column (A), lines 5, 6d,	8c, 9c, 10c, and 11e)			400.	16,900.
	12	Total revenue - add lines 8 through 11 (must equ	ual Part VIII, column (A), line 12)		2,004,	483.	2,018,192.
	13	Grants and similar amounts paid (Part IX, colum	n (A), lines 1-3)		36,	213.	23,568.
		Benefits paid to or for members (Part IX, column	,			0.	0.
ω		Salaries, other compensation, employee benefit	• • •	, h	567,	102.	551,861.
2018 es				` <u> </u> -		0.	0.
\$\$\$	l .	Professional fundraising fees (Part IX, column (A		o.	· - · · · · · · · · · · · · · · · · · ·		
2	D	Total fundraising expenses (Part IX, dolumn	100 (25)	- " ⊦	1 220	267	1 266 221
~	17	Other expenses (Part IX, column (A), ines 11a-1 Total expenses Add lines 13-17 (mus Qualiffa	1d, 11f-24e)	L	1,330,		1,266,331.
-	18	Total expenses Add lines 13-17 (must dual Pa	VIX【columbil (A), lineと多り		1,933,		1,841,760.
()	19	Revenue less expenses Subtract line 🔠 rom li				901.	176,432.
Sed Fi		ا ا	ODEN LIT		Beginning of Curr	ent Year	End of Year
<u> </u>	20	Total assets (Part X, line 16)	GDEN, UT		1,903,	351.	2,199,604.
Assel designation		Total liabilities (Part X, line 26)		T	219,	187.	213,055.
CANNED SELECTION OF THE ASS.		Net assets or fund balances Subtract line 21 from	om line 20	F	1,684,		1,986,549.
SIB	rt II	Signature Block	JIT III C E O				
		Ities of perjury, I declare that I have examined this retu	n uncluding possessenting school-	ac and state	amonte and to the	hoot of mul o	avuladas and balist itis
3 01106							owleage and beller, it is
O true,	correc	t, and complete Declaration of plegarer (Ather than of	icer) is based on all information of v	vnich prepa	rer nas any knowle		
		CHIXTON				4-5	<u>-18</u>
Sıgr	1	Signature of Officer			Date		
Here	е		CUTIVE DIRECTOR				
		Type or print name and title					
		Print/Type preparer's name	Preparer's signature		Date	Check	PTIN
Paid	1	· Sectional annuals				if	
Prep		Firm's name	_ 1	-	L Corm'	self-employed	<u> </u>
	Only	Firm's name				s EIN 🛌	
USE	UIIIY	Firm's address					
					Phon	e no	,,
May	the If	RS discuss this return with the preparer shown a	bove? (see instructions)				Yes No
73200	01 11-2	8-17 LHA For Paperwork Reduction Act No	tice, see the separate instruct	ions.	0.0	\sim	Form 990 (2017)

732002 11-28-17

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TN SECTION PGA OF AMERICA

62-0863884

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		х
2	is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		х
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		7,7	
6	similar amounts as defined in Revenue Procedure 98·19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5_	Х	
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		X
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
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		х
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		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	<u></u>		
а	as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
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		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	174		
	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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		х
	complete Schedule G, Part III	19 Form	990 (
			,	/

Part IV Checklist of Required Schedules (continued)

			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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		х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21	-	
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22	х	
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	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
	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		х
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		x
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)	1.		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		1	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
2 9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u> </u>
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		х
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		X
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		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
D	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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (2017)

	990 (2017) TN SECTION PGA OF AMERICA 62-0863	884	P	age 5
Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Gheck 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 128			
b	Enter the number of Forms W-2G included in line 1a Enter ·0· if not applicable 1b 0	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,		ı	
	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?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
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	X	
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		X
b	If "Yes," enter the name of the foreign country ▶			
	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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			ش
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	. 1		
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year		——,	
е	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?	7 f		
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	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		 -
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		 ;
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
a b	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter	ļ		}
a	Gross income from members or shareholders	l	ł	
	Gross income from other sources (Do not net amounts due or paid to other sources against			
~	amounts due or received from them)	I		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		1	1
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O			1
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			
С	Enter the amount of reserves on hand	٠	-	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990	(2017)

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

_	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec.	tion 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 11			
	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 1b		,	
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		X
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		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5_		X
6	Did the organization have members or stockholders?	6	X	
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	X	
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	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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		X
Sec	tion 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	X	
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	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
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	X	
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	<u> </u>	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent		1	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		Х
	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		Х
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		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	ıvaılab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X 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	i finan	cıal	
	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			
	TN SECTION PGA CONTROLLER - 561-624-8400	10		
	300 AVE OF THE CHAMPIONS #205, PALM BEACH GARDENS, FL 33410-18	4 ö		

Form 990 (2017) 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B)			((2)			(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos heck	more	than	one	Reportable	Reportable	Estimated
	hours per					is boti or/trus		compensation	compensation	amount of
	week (list any	Ē			Π			from the	from related organizations	other compensation
	hours for	direc				-		organization	(W-2/1099-MISC)	from the
	related	ie o	stee			ensate		(W-2/1099-MISC)	(*** = **** = **** = ****	organization
	organizations	trus	nal tru		oyee	omp(and related
•	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	line)	흘	in.	₽	ē.	훈통	<u>ج</u>			
(1) SCOTT MORAN	1.00	↓							0	0
DIRECTOR	1 00	X	_	Щ	_	\vdash		0.	0.	0
(2) SCOTT WILSON	1.00	↓							0	
DIRECTOR	1 00	X	_		<u> </u>	<u> </u>		0.	0.	0
(3) BRYAN COMBITHS	1.00	x						0.	0	
DIRECTOR (4) MARK HOUSER	1.00	₽			_	-		U •	0.	0
	1.00	x						0.	0.	0
DIRECTOR (5) JON GOIN	1.00	₽		_		H		0.	0.	0
DIRECTOR	1.00	X						0.	0.	0
(6) ADAM CAMPBELL	1.00	<u> </u>			┢			0.		0
DIRECTOR	1.00	X			ł			0.	0.	0
(7) SID JOHNSON	1.00	 	-		-			· · · · · · · · · · · · · · · · · · ·	<u> </u>	
DIRECTOR	1 2100	\mathbf{x}						0.	0.	0 .
(8) JOHNNY BRIDGEMAN	2.00	+		-						
PRESIDENT		1		Х				0.	0.	0
(9) KEN CROWDER	2.00	T								
PAST PRESIDENT		1		Х				0.	0.	0
(10) JIM WEST	2.00									
SECRETARY		1		Х				0.	0.	0
(11) JIM VERNON	2.00									
VICE PRESIDENT		<u> </u>		X				0.	0.	0
(12) CLAYTON HROMADKA	55.00									
EXECUTIVE DIRECTOR		<u> </u>		X	<u> </u>			134,609.	0.	22,086
]								
	==	乚			<u> </u>					
]								
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Form 990 (2017)

- 41	Section A. Officers, Directors, Trus	tees, Ney Em	pioy	ees	, and	<u>a ni</u>	gne	St C	compensated Employe	es (continueu)				
	(A) Name and title	(B) Average hours per	box.	not c , unle	Pos heck ss pe	more rson	than is bot	h an	(D) Reportable compensation	(E) Reportable compensation	on	am	(F) timate nount o	
		week (list any hours for related organizations below line)	tee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organization (W-2/1099-Mis	ıs	com fro orga and	other pensa om the anizati d relate anizatio	eq óu e
		iine)	E	Su!	8	Xey	宝恵	För						
					<u> </u>									
				-	-	_		-	-					
								L_						
		<u> </u>												
			\vdash		\vdash			 						
					<u> </u>		<u> </u>							
			Г											
	Sub-total Sub-total				L_		١.	▶	134,609.		0.	2	2,0	86.
	Total from continuation sheets to Part V	II, Section A						•	0.		0.		_	0.
d	Total (add lines 1b and 1c) Total number of individuals (including but r	ot limited to th		lieta	ad al	how	ابد (د	<u>▶</u>	134,609.	000 of reportab	0.		2,0	86.
	compensation from the organization		1036	11516	su ai	DOV	<i></i>	10 11	eceived more man \$100	,000 or reportab	<u> </u>			1
2	Did the evacuration let any former officer	director or tri	.oto	م اده	0.			~-	highest compensated o	malayaa aa	ļ		Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			е, ке	ey er	npic	yee	, or	nignest compensated e	mpioyee on		3		X
4	For any individual listed on line 1a, is the su									the organization			<u>x</u>	
5	and related organizations greater than \$15 Did any person listed on line 1a receive or a	•								idual for services	,	4	^	
	rendered to the organization? If "Yes," com	· · · · · · · · · · · · · · · · · · ·				-						5		X
Sec 1	tion B. Independent Contractors Complete this table for your five highest co	mpensated in		ende	ent c	onti	racto	ors t	that received more than	\$100,000 of cor	npens	ation f	rom	
	the organization Report compensation for								n the organization's tax					
	(A) Name and business	address	N(ІИС	Ξ				(B) Description of s	ervices	С	(C omper		า
												-		
								\dashv						
				_										
								\dashv						
												<u>.</u>		
2	Total number of independent contractors (in \$100,000 of compensation from the organic	_	iot lii	mıte	d to	tho (se li: 0	stec	d above) who received n	nore than			•	
	The state of the s					_		-					000	

Form	990) (2			A OF AME	RICA		62-0863	884 Page 9
Pa	rt V	/III	Statement of Rever	nue					
			. Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
1						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ıts	1	a	Federated campaigns	1a					
ar our			Membership dues	1b					j
s, C		С	Fundraising events	1c					, j
Sift		d	Related organizations	1d					;
S, E		е	Government grants (contribut	ions) 1e					
tior S		f	All other contributions, gifts, gran	ts, and	·				
ğ.			similar amounts not included above	ve 1f	66,500.				
Contributions, Gifts, Grants and Other Similar Amounts		g	Noncash contributions included in lines	1a-1f \$					
<u>2</u> 2		h	Total. Add lines 1a-1f		•	66,500.			
					Business Code	- -			
ပ္သ	2	а	TOURNAMENT REVENUE		900099	941,548.	941,548.		
ervi		b	HANDICAP REVENUE		900099	355,431.	355,431.		
n S		С	ADP - FUNDING		900099	239,605.	239,605.		
ar Re∖		d	SPONSORSHIP REVENUE		900099	188,030.	22.17	· -	188,030.
Program Service Revenue		е	MEMBERSHIP DUES		900099	88,457.	88,457.		
_		f	All other program service reve	enue	900099	74,661.	74,661.		
_		g	Total. Add lines 2a-2f			1,887,732.			'-լ
	3		Investment income (including	dividends, intere	est, and	22,708.			22,708.
			other similar amounts)			22,700.	-		22,700.
	5		Income from investment of tax	x-exempt bond t	proceeds	15,000.			15,000.
] 3		Royalties	(ı) Real	(II) Personal	13,000.			13,000.
	ء ا	_	Gross rents	(I) neal	(ii) Fersonai				
	1	b	Less rental expenses						,
	l	c	Rental income or (loss)						, t -
	l	d			•				
	1		Gross amount from sales of	(i) Securities	(II) Other				
	`		assets other than inventory	1,202,192.					1,6
		b	Less cost or other basis						4
			and sales expenses	1,177,816.	24.		ľ		, " .
		Ç	Gain or (loss)	24,376.	<24.	>			+ 4
		d	Net gain or (loss)			24,352.			24,352.
<u>a</u>	8	а	Gross income from fundraising	g events (not					
eur			including \$	of					
ě			contributions reported on line	1c) See					
e			Part IV, line 18	а					
Other Revenue	ı		Less direct expenses	b	L	<u></u>	į į.		
	ı		Net income or (loss) from fund	=	>				
	9	а	Gross income from gaming ac						
			Part IV, line 19	a					
			Less direct expenses	b			 		
	•		Net income or (loss) from gam	_	•				
	10	а	Gross sales of inventory, less						,
		_	and allowances	а					
			Less cost of goods sold	b o of investory			-		
		C	Net income or (loss) from sale		Business Code				
	11	2	Miscellaneous Revenu ADVERTISING REVENUE		541800	1,900.	 -	1,900.	-
		a b		_					
		c							-
		d	All other revenue	· · · · · · · · ·					
			Total. Add lines 11a-11d		•	1,900.			. 1
	12		Total revenue See instructions.		•	2,018,192.	1,699,702.	1,900.	250,090.

Pai	rt IX Statement of Functional E	xpenses					
Secti	tion 501(c)(3) and 501(c)(4) organizations m	nust complet	te all columns All oth	ner organizations must o	complete column (A)		
	Check if Schedule O contains	a response	or note to any line in	this Part IX		T	\supset
	not include amounts reported on lines 6b, 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 organ	nızatıons		-	•	1	
	and domestic governments. See Part IV, line 2	21	12,622.			Ч	
2	Grants and other assistance to domestic	;			, , , , ,		
	individuals See Part IV, line 22		10,946.			1	*:
3	Grants and other assistance to foreign					;	
	organizations, foreign governments, and	foreign				1	į
	individuals See Part IV, lines 15 and 16					,	
4	Benefits paid to or for members				ſ		,
5	Compensation of current officers, director	ors,	4-6-60-				
	trustees, and key employees	<u> </u>	156,695.				
6	Compensation not included above, to disquali						
	persons (as defined under section 4958(f)(1))) and					
	persons described in section 4958(c)(3)(B)		242 201			 	
7	Other salaries and wages	. —	343,321.		ļ	ļ	
8	Pension plan accruals and contributions (inclu		4 202			}	
_	section 401(k) and 403(b) employer contribut	tions)	4,382. 12,403.				
9	Other employee benefits	<u> </u>	35,060.			 	
10	Payroll taxes	<u> </u>	33,000.			ļ	
11	Fees for services (non-employees)						
a	-	_				 	—
b	3	⊢				<u> </u>	
ر م	Accounting Lobbying	⊢					
u	 Professional fundraising services See Part IV. 	line 17				<u> </u>	_
f	Investment management fees	,					_
, q		ne 25					
9	column (A) amount, list line 11g expenses on		48,018.				
12	Advertising and promotion	· //	62,967.				_
13	Office expenses		22,813.				
14	Information technology		,				
15	Royalties					1	
16	Occupancy		14,967.				
17	Travel		155,832.				
18	Payments of travel or entertainment exp	enses					
	for any federal, state, or local public office	cials				<u> </u>	
19	Conferences, conventions, and meetings	s					
20	Interest						
21	Payments to affiliates						
22	Depreciation, depletion, and amortization	n	17,667.				
23	Insurance		19,286.				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24 24e amount exceeds 10% of line 25, column amount, list line 24e expenses on Schedule 0	4e If line (A)	,		·	•	
а	MOTIONIA MENIM DIDECTO	' 	483,470.				
a h	TOURNAMENT OPERATION	\overline{s}	259,729.				
	FOOD AND BEVERAGE	-	99,443.			 	
q	PROCESSING FEES	—	38,346.			 	
e	***		43,793.			<u> </u>	_
25	Total functional expenses Add lines 1 through	ah 24e	1,841,760.		1		
26	Joint costs Complete this line only if the orga						
	reported in column (B) joint costs from a com					-	
	educational campaign and fundraising solicita						

11581102 791870 TNSEC

Check here if following SOP 98-2 (ASC 958-720)

<u>Par</u>	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
	•		(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	357,926.	1	499,085
	2	Savings and temporary cash investments	64,844.	2	69,243
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	230,991.	4	247,776
	5	Loans and other receivables from current and former officers, directors,			, 1
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under	r .		4
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribution	ng		1
		employers and sponsoring organizations of section 501(c)(9) voluntary	·		
ts		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
⋖	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	6,664.	9	5,312
	10a	Land, buildings, and equipment cost or other		,	• ,.
	İ	basis Complete Part VI of Schedule D 10a 142, 68			
	ь	Less accumulated depreciation 10b 119,66		10c	23,024
	11	Investments - publicly traded securities	1,196,730.	11	1,352,783
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets	F 401	14	
	15	Other assets See Part IV, line 11	5,481.	15	2,381
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,903,351.	16	2,199,604
	17	Accounts payable and accrued expenses	79,973.	17	65,471
	18	Grants payable	120 214	18	147 504
	19	Deferred revenue	139,214.	19	147,584
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ties	22	Loans and other payables to current and former officers, directors, trustees,			7, , ,
Lrabilities		key employees, highest compensated employees, and disqualified persons			
Lıa		Complete Part II of Schedule L	-	22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24 25	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	219,187.	26	213,055
		Organizations that follow SFAS 117 (ASC 958), check here		_20_	220,000
s		complete lines 27 through 29, and lines 33 and 34.			
οc	27	Unrestricted net assets	1,684,164.	27	1,986,549
alaı	28	Temporarily restricted net assets		28	,
9 9	29	Permanently restricted net assets		29	
Š		Organizations that do not follow SFAS 117 (ASC 958), check here			
or F		and complete lines 30 through 34.			ļ '
ts	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	1,684,164.	33	1,986,549
	34	Total liabilities and net assets/fund balances	1,903,351.	34	2,199,604

	990 (2017) TN SECTION PGA OF AMERICA	62-086	3884	Page 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O)	1 2 3 4 5 6 7 8 9	1,684	,760. ,432.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	1,986	<u>,549.</u>
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
1 2a	Accounting method used to prepare the Form 990 Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule Were the organization's financial statements compiled or reviewed by an independent accountant?	• 0	2a	res No
b	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?	d on a		X
c	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			\$ ·
	review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O	2c	
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Act and OMB Circular A·133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	-	3a	$\frac{1}{x}$
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
			Form 9	90 (2017)

732012 11-28-17

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2017

Open to Public Inspection

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

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

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

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

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

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

Schedule C (Form 990 or 990-EZ) 2017

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Sched	dule C (Form 990 or 990-EZ) 2017	TN SEC	TION	PGA OF AMER	ICA	62-0	863884 Page 2
Par	t II-A Complete if the org	anization	is exe	mpt under sectio	n 501(c)(3) and fil	ed Form 5768 (e	lection under
	section 501(h)).						
A Ch	eck 🕨 🔲 if the filing organiza	tion belongs	to an aff	iliated group (and list in	n Part IV each affiliated	group member's nan	ne, address, EIN,
	expenses, and shar						
B Ch	eck 🕨 📖 if the filing organiza	tion checked	box A a	nd "limited control" pro	ovisions apply		
		ts on Lobby ditures" mea	•	nditures unts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
	Total lobbying expenditures to influ	uence public	opinion ((grass roots lobbying)	-		_
	Total lobbying expenditures to influ	•					
	Total lobbying expenditures (add li	· ·		, , , , , ,			
	Other exempt purpose expenditure		•				
	Total exempt purpose expenditure		1c and 1c	d)			
	Lobbying nontaxable amount Ente	•		•	h columns		
	If the amount on line 1e, column (a) of			bying nontaxable am			,
Ī	Not over \$500,000			the amount on line 1e]
	Over \$500,000 but not over \$1,000	0,000	\$100,00	00 plus 15% of the exc	ess over \$500,000	-]
	Over \$1,000,000 but not over \$1,5	00,000	\$175,00	00 plus 10% of the exc	ess over \$1,000,000		
	Over \$1,500,000 but not over \$17,	,000,000	\$225,00	00 plus 5% of the exce	ss over \$1,500,000	s .	''
[Over \$17,000,000		\$1,000,	000			3
							• • •
g	Grassroots nontaxable amount (en	nter 25% of li	ne 1f)				
h	Subtract line 1g from line 1a If zer	o or less, ent	ter -0-				
İ	Subtract line 1f from line 1c If zero	or less, ente	er -0-				<u> </u>
j	If there is an amount other than ze	ro on either l	line 1h or	line 1i, did the organiz	ation file Form 4720	r	
	reporting section 4911 tax for this						Yes No
	(Some organizations to	hat made a s	section 5	eraging Period Under 601(h) election do not ate instructions for li	have to complete all	of the five columns b	pelow.
		Lobbyi	ng Expe	nditures During 4-Yea	ar Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 20	14	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount						
	(150% of line 2a, column(e))	,				•	
c	Total lobbying expenditures						,
А	Grassroots nontaxable amount						
	Grassroots ceiling amount			<u> </u>			
	(150% of line 2d, column (e))						
f	Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2017

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

of the Johnwan estautu	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description				o)
of the lobbying activity	No	Amount			
During the year, did the filing organization attempt to	influence foreign, national, state or				1
local legislation, including any attempt to influence pi	ublic opinion on a legislative matter				- (4 4)
or referendum, through the use of				·	4
a Volunteers?					
b Paid staff or management (include compensation in e	expenses reported on lines 1c through 1i)?				Ċ.
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?				l	
g Direct contact with legislators, their staffs, governme	nt officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, spec	eches, lectures, or any similar means?			<u></u>	
i Other activities?					
j Total Add lines 1c through 1i		<u> </u>			
2a Did the activities in line 1 cause the organization to b	e not described in section 501(c)(3)?				-2
b If "Yes," enter the amount of any tax incurred under	section 4912				
c If "Yes," enter the amount of any tax incurred by orga	anization managers under section 4912				
d If the filing organization incurred a section 4912 tax,					-
	xempt under section 501(c)(4), se	ction 501(c)(5), or se	ection	
					
501(c)(6).				Yes	No
501(c)(6).	andeductible by members?			Yes	
501(c)(6). 1 Were substantially all (90% or more) dues received n	-		1 2		
501(c)(6). Were substantially all (90% or more) dues received in Did the organization make only in-house lobbying expansion agree to carry over lobbying and cart III-B Complete if the organization is expansion in the complete in the organization is expansion in the complete in the organization is expansion in the complete in the organization is expansion in the complete in the organization is expansion in the complete in the organization is expansion in the complete in the organization is expansion.	penditures of \$2,000 or less? I political campaign activity expenditures fro xempt under section 501(c)(4), se	ction 501(c	2 3 (5), or se	X	X
501(c)(6). 1 Were substantially all (90% or more) dues received in 2 Did the organization make only in-house lobbying exp 3 Did the organization agree to carry over lobbying and cart III-B Complete if the organization is e 501(c)(6) and if either (a) BOTH Pa answered "Yes."	penditures of \$2,000 or less? I political campaign activity expenditures from the section 501(c)(4), secured art III-A, lines 1 and 2, are answer.	ction 501(c	2 3)(5), or se R (b) Par	X	X
501(c)(6). 1 Were substantially all (90% or more) dues received in 2 Did the organization make only in-house lobbying exp 3 Did the organization agree to carry over lobbying and cart III-B Complete if the organization is e 501(c)(6) and if either (a) BOTH Pa answered "Yes." 1 Dues, assessments and similar amounts from members.	penditures of \$2,000 or less? I political campaign activity expenditures from the political campaign activity expension activities activities and the political campaign activities	ction 501(c) red "No," O	2 3 (5), or se	X	X
501(c)(6). 1 Were substantially all (90% or more) dues received in 2 Did the organization make only in-house lobbying exp 3 Did the organization agree to carry over lobbying and cart III-B Complete if the organization is exponentially and if either (a) BOTH Paramswered "Yes." 1 Dues, assessments and similar amounts from member 2 Section 162(e) nondeductible lobbying and political exponential in the control of the control	penditures of \$2,000 or less? I political campaign activity expenditures from the political campaign activity expenditures from the political campaign activity expenditures from the political campaign activity expenditures (do not include amounts of political campaign).	ction 501(c) red "No," O	2 3)(5), or se R (b) Par	X	X
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501(c)(6). Were substantially all (90% or more) dues received in Did the organization make only in-house lobbying expand and the organization agree to carry over lobbying and cart III-B Complete if the organization is expenses for which the section 527(f) tax was paid a Current year	penditures of \$2,000 or less? I political campaign activity expenditures from the political campaign activity expenditures from the political campaign activity expenditures from the political campaign activity expenditures (do not include amounts of political campaign).	ction 501(c) red "No," O	2 3 (5), or se R (b) Par	X	X
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501(c)(6). 1 Were substantially all (90% or more) dues received in 2 Did the organization make only in-house lobbying exp 3 Did the organization agree to carry over lobbying and cart III-B Complete if the organization is exponential to the complete of the organization is exponential to the organization of the organization is exponential to the organization is exponential to the organization of the organization is exponential to the organization of the organization is exponential to the organization of the organization is exponential to the organization of the orga	penditures of \$2,000 or less? I political campaign activity expenditures from the political campaign activity expenditures from the political campaign activity expenditures from the political campaign and the political campaign and the political campaign and the political campaign and the political campaign and the political campaign and the political campaign and the political campaign and the political campaign and the political campaign and the political campaign and the political campaign activity expenditures from the political campaign activities from the political campaign activities from the political campaign activity expension activities from the political campaign activities	ction 501(c) red "No," O	2 3 (5), or se R (b) Par	X	X
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501(c)(6). 1 Were substantially all (90% or more) dues received in 2 Did the organization make only in-house lobbying exp. 3 Did the organization agree to carry over lobbying and part III-B Complete if the organization is exponsed "Yes." 1 Dues, assessments and similar amounts from member 2 Section 162(e) nondeductible lobbying and political expenses for which the section 527(f) tax was paid a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) in 15 findices were sent and the amount on line 2c exceed	penditures of \$2,000 or less? I political campaign activity expenditures from the political campaign activity expenditures from the political campaign activity expenditures from the political campaign activity expenditures and 2, are answer errors expenditures (do not include amounts of political campaign). Indicate the amount on line 3, what portion of the political campaign are political campaign.	ction 501(c) red "No," O clitical	2 3)(5), or se R (b) Par 1 2a 2b 2c	X	X
501(c)(6). 1 Were substantially all (90% or more) dues received in 2 Did the organization make only in-house lobbying exp. 3 Did the organization agree to carry over lobbying and part III-B Complete if the organization is exp. 501(c)(6) and if either (a) BOTH Paranswered "Yes." 1 Dues, assessments and similar amounts from member 2 Section 162(e) nondeductible lobbying and political expenses for which the section 527(f) tax was paid a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) in 15 finotices were sent and the amount on line 2c exceed does the organization agree to carryover to the reason	penditures of \$2,000 or less? I political campaign activity expenditures from the political campaign activity expenditures from the political campaign activity expenditures from the political campaign activity expenditures and 2, are answer errors expenditures (do not include amounts of political campaign). Indicate the amount on line 3, what portion of the political campaign are political campaign.	ction 501(c) red "No," O clitical	2 3 (5), or se R (b) Par 1 2a 2b 2c 3	X	x x ne 3,
501(c)(6). 1 Were substantially all (90% or more) dues received in 2 Did the organization make only in-house lobbying exp. 3 Did the organization agree to carry over lobbying and part III-B Complete if the organization is exp. 501(c)(6) and if either (a) BOTH Paranswered "Yes." 1 Dues, assessments and similar amounts from member 2 Section 162(e) nondeductible lobbying and political expenses for which the section 527(f) tax was paid a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) in 15 finotices were sent and the amount on line 2c exceeds	penditures of \$2,000 or less? I political campaign activity expenditures from the political campaign activity expenditures from the political campaign activity expenditures from the political campaign activity expenditures from the political campaign and the political campaign and the political campaign and the political campaign and the political campaign and the political campaign and the political campaign and the political campaign and the political campaign and the political campaign and the political campaign activity expenditures from the political campaign activity expenditures fr	ction 501(c) red "No," O clitical	2 3)(5), or se R (b) Par 1 2a 2b 2c	X	X

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.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

TN SECTION PGA OF AMERICA

Employer identification number 62-0863884

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	ne 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 advi	sed funds
	are the organization's property, subject to the organization's	=	Yes No
6	Did the organization inform all grantees, donors, and donor a	-	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	<u></u>
	violations, and enforcement of the conservation easements i	t holds?	└── Yes └── No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	0(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		└─_ Yes
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	s the organization's accounting for
_	conservation easements		
Pa	rt III Organizations Maintaining Collections o	·	Other Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	•	
	historical treasures, or other similar assets held for public ext		ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pi	ublic 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 tre		al gaın, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items	_
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		\$

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017

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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

Schedule D (Form 990) 2017

	edule D (Form 990) 2017 TN SECTION PGA OF AMER.		62-0863884	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial St	atements With Reven	ue per Return.	
	`Complete if the organization answered "Yes" on Form 990, Part IV, I	ne 12a		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1		
a	<u> </u>	2a		
b		2b		
C	Recoveries of prior year grants	2c		
d	,	2d	 	
е 3	Add lines 2a through 2d Subtract line 2e from line 1		2e 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		3	
a		4a		
b	60. (6.1)	4b		
c			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	')	5	
	rt XII Reconciliation of Expenses per Audited Financial S			
	Complete if the organization answered "Yes" on Form 990, Part IV, I	=	•	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С			4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information.	18)	5	
lines	2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide a	any additional information		
				<u> </u>
			.,	
				
				·

SCHEDULE I (Form 990)

Part I

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.

Department of the Treasury Internal Revenue Service

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

Name of the organization

TN SECTION PGA OF AMERICA

General Information on Grants and Assistance

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and criteria used to award the grants or assistance?
 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 Forn

recipient that received more than 1 (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) Desc noncash a
TENNESSEE GOLF FOUNDATION 400 FRANKLIN RD						
FRANKLIN, TN 37069-8204	58-1893478	501 C(3)	10,407.	0,		
	<u> </u>					
					- 100	

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

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

Schedule I (Form 990) (2017) TN SECTION PGA OF AMERICA

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(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of non-	(e) Method of valuation (book, FMV, appraisal, other
	recipients	cash grant	cash assistance	(book, Fivry, appraisal, other
DELEK SCHOLARSHIPS	6	10,946.	0.	
PEDER SCHODARSHIFS		10,540.	· ·	· · · · · · · · · · · · · · · · · · ·
				,
Part IV Supplemental Information. Provide the information	ion required in Part Lline	e 2 Part III. column	(b) and any other a	dditional information
Turing Supplemental Missing Control of the Missing	ion rodanos irr arti, im	5 E, 1 art III, 001aiiii	(b), and any other a	oditional information
				
				
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SCHEDULE J (Form 990)

€ 4 1 ·

Department of the Treasury Internal Revenue Service

Name of the organization

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2017

Open to Public Inspection

TN SECTION PGA OF AMERICA

Employer identification number 62-0863884

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate 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	i	*	
	First-class or charter travel Housing allowance or residence for personal use		•	
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
			١.	
b	If any of the boxes on 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		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
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	ł	١.	
	Compensation committee X Written employment contract			
	Independent compensation consultant X Compensation survey or study	. ا	•	
	Form 990 of other organizations X Approval by the board or compensation committee	l .		,
		·	ľ. '	-
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			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a·c, list the persons and provide the applicable amounts for each item in Part III		,	
	Only section 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			
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes" on line 5a or 5b, describe in Part III	İ	-	
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			١.
	contingent on the net earnings of			<u> </u>
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued 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		

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Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

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 organization on the organization on row (i) and from related organization on the organization of the orga

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

		(B) Breakdown of	W·2 and/or 1099·MI	(C) Retirement and other deferred	(D) Nontaxable benefits		
(A) Name and Title	(ı) Base compensation	(II) Bonus & Incentive compensation	(III) Other reportable compensation	compensation	benents		
(1) CLAYTON HROMADKA	(1)	134,609.	0.	0.	6,601.	15,485.	
EXECUTIVE DIRECTOR	((i)	0.	0.	0.	0.	0.	
	(1)						
	(1)						
	(1)						
	(ii)						
	(i)						
	(ii)		14 1				
	(i)						
	(ii)						
	(1)						
	(11)						
	(1)						
	(11)						
	(i)						
	(11)						
	(1)						
	(11)						
	(i)						
	(ii)						
	(i)						
	(ii)						
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	(ii)						
	(0)	_					
	(ii)						
	(0)						
	(ii)						
	(0)						
	(11)						
	(1)						
	(11)				<u> </u>		

Schedule J (Form 990) 2017 TN SECTION PGA OF AMERICA
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
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SCHEDULE 0

Maria D

(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 Open to Public Inspection

Name of the organization

TN SECTION PGA OF AMERICA

Employer identification number 62-0863884

THE DECITOR FOR OF AMERICA 02-0003004
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO ELEVATE THE STANDARDS OF THE PROFESSIONAL GOLFER'S VOCATION AND TO
PROMOTE INTEREST IN THE GAME OF GOLF.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO ELEVATE THE STANDARDS OF THE PROFESSIONAL GOLFER'S VOCATION AND TO
PROMOTE INTEREST IN THE GAME OF GOLF.
FORM 990, PART VI, SECTION A, LINE 6:
NOT FOR PROFIT CORPORATION WITH MEMBERS.
FORM 990, PART VI, SECTION A, LINE 7A:
THE ORGANIZATION'S MEMBERS ELECT MEMBERS OF THE GOVERNING BODY.
FORM 990, PART VI, SECTION A, LINE 7B:
MEMBERS MAINTAIN THE RIGHT TO RATIFY DECISIONS MADE BY THE GOVERNING BODY.
FORM 990, PART VI, SECTION B, LINE 11B:
THE EXECUTIVE DIRECTOR OF THE TENNESSEE SECTION REVIEWS THE COMPLETED 990
RETURN FOR COMPLETENESS AND ACCURACY PRIOR TO FILING. IN ADDITION, A COPY
IS SUPPLIED TO THE BOARD FOR REVIEW AND APPROVAL.
FORM 990, PART VI, SECTION B, LINE 12C:
THE SECTION INTERVIEWS OFFICERS AND DIRECTORS ABOUT ANY POTENTIAL CONFLICTS
AND REVIEWS THE CONFLICT OF INTEREST POLICY WITH THEM ANNUALLY.

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

Schedule O (Form 990 or 990-EZ) (2017)

TNSEC 1

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