DLN: 93493319110889 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 C Name of organization D Employer identification number B Check if applicable Ladies Professional Golf Association ☐ Address change 75-0055465 % KATHRYN MILTHORPE ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Application pending (386) 274-6200 City or town, state or province, country, and ZIP or foreign postal code Daytona Beach, FL 321241092 G Gross receipts \$ 126,513,866 Name and address of principal officer H(a) Is this a group return for KATHRYN H MILTHORPE ☐Yes ☑No subordinates? 100 International Golf Drive H(b) Are all subordinates Daytona Beach, FL 321241092 ☐ Yes ☐No ıncluded? 501(c)(3) **✓** 501(c) (6) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► www lpga com L Year of formation 1950 M State of legal domicile FL Summary 1 Briefly describe the organization's mission or most significant activities TO PROMOTE WORLDWIDE INTEREST IN THE GAME OF WOMEN'S PROFESSIONAL GOLF Activities & Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 15 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . 6 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 160 **6** Total number of volunteers (estimate if necessary) 6 5,000 Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, line 34 0 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . Ravenua 136,196,004 126,273,633 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . -12,370 240,233 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 136,183,634 126,513,866 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 868,921 720,288 650,000 650,000 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 13,854,517 14,680,483 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 119,628,354 110,148,702 135,001,792 126,199,473 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 1,181,842 314,393 Net Assets or Fund Balances Beginning of Current Year **End of Year** 67,504,781 71,886,362 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 53,197,194 57,264,382 22 Net assets or fund balances Subtract line 21 from line 20 . 14,307,587 14,621,980 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-11-15 Signature of officer Sign Here KATHRYN H MILTHORPE CFO Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 ıf P00543988 Paid self-employed Firm's name Frant Thornton LLP Firm's EIN ▶ Preparer Use Only Firm's address ▶ 200 South Orange Avenue Suite 2050 Phone no (407) 481-5100 Orlando, FL 32801 ✓ Yes 🗆 No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)				Page 2
Pa	statement	of Program Service Acc	complishments		
	Check if Sche	dule O contains a response or	note to any line in this Part III .		🗆
1	Briefly describe the o	rganization's mission	·		
ADM			NOMEN'S PROFESSIONAL GOLF F EDUCATION AND CERTIFICATION		
2			gram services during the year whi		☐ Yes ☑ No
	If "Yes," describe the	se new services on Schedule	0		
3	Did the organization services?	<u>.</u>	gnificant changes in how it conduct	ets, any program	☐ Yes 🗹 No
	If "Yes," describe the	se changes on Schedule O			
4	Section 501(c)(3) an		nplishments for each of its three la required to report the amount of service reported		
4a	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
	See Additional Data	, (4.1)		, (,
4b	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
	See Additional Data				
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data				
4d	Other program service	ces (Describe in Schedule O)			
	(Expenses \$	including (grants of \$) (Revenue \$)
4e	Total program serv	rice expenses ▶			
					Form 990 (2018)

Form	990 (2018)			Page 3
Pa	tIV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 2	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X 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	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	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 2	11c		No
	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 2	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a		No
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section $170(b)(1)(A)(II)$? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

Νo

No

Nο

Form 990 (2018)

20b

21

22

19

21

22

	990 (2018)			Page
ar	Checklist of Required Schedules (continued)			
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes Yes	No
•	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
	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 any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
ı	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		
	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		
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		N
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		N
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
ı	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	
alı	Statements Regarding Other IRS Filings and Tax Compliance	· · · · ·		_
	Check if Schedule O contains a response or note to any line in this Part V			
a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 618		Yes	N

1b

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

1c

Yes

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

7h

8

9a

9h

12a

13a

14a

14b

15

Yes

Form 990 (2018)

No

10a

10b

11a

11b

12b

13b

13c

19

990 (2018)			Page
Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 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	" respo	onse to	lines
ction A. Governing Body and Management			
		Yes	No
Enter the number of voting members of the governing body at the end of the tax year 15			
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
Enter the number of voting members included in line 1a, above, who are independent 1b 6			
Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
Did the organization have members or stockholders?	6	Yes	
Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b	Yes	
Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
The governing body?	8a	Yes	
Each committee with authority to act on behalf of the governing body?	8b	Yes	
Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
		Yes	No
	10a		No
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		
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
Describe in Schedule O the process, if any, used by the organization to review this Form 990			
Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
·			
Did the organization have a written whistleblower policy?	13	Yes	
Did the organization have a written whistleblower policy?	13 14	Yes Yes	
	\vdash		
Did the organization have a written document retention and destruction policy?	\vdash		
Did the organization have a written document retention and destruction policy?	14	Yes	
Did the organization have a written document retention and destruction policy?	14 15a	Yes Yes	
Did the organization have a written document retention and destruction policy?	14 15a	Yes Yes	No
Did the organization have a written document retention and destruction policy?	14 15a 15b	Yes Yes	No
Did the organization have a written document retention and destruction policy?	15a 15b	Yes Yes	No
Did the organization have a written document retention and destruction policy?	15a 15b	Yes Yes	No
	Check if Schedule O contains a response or note to any line in this Part VI . ction A. Governing Body and Management Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent 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? 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. Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization have members or stockholders? Did the organization have members or stockholders? 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? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 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 Did the organization have local chapters, branches, or affiliates? 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?	Check if Schedule O contains a response or note to any line in this Part VI. Cition A. Governing Body and Management Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent Ib 6 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization have members or stockholders? 6 Did the organization have members or stockholders? 6 Did the organization have members, stockholders? 6 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? 7 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8 Ba 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 Did the organization have local chapters, branches, or affiliates? Did the organization have local chapters, branches, or affiliates? Did the organization have local chapters, branches, or affiliates? Did the organization have diverse the process, if any, used by the organization to review this Form 990 Did the organization have a written policies and procedures governing the activities of such chapter	Check if Schedule O contains a response or note to any line in this Part VI Cition A. Governing Body and Management Yes Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting nights 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 Enter the number of voting members included in line 1a, above, who are independent Ib Od any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? Did the organization delegated 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization have members or stockholders? Did the organization have members or stockholders? Did the organization have members or stockholders? To but the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? To but the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? Bay Yes Each committee with authority to act on behalf of the governing body? Bay Yes Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? Bay Yes Each committee with authority to act on behalf of the governing body? Bay Yes Did the organization formation about policies in required by the Internal Revenue Code. Yes Did the organization for greaters information about policies in required by the Internal Revenue Code. Yes Did the orga

 \square Own website \square Another's website \square Upon request \square Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

compensated employees, and former such persons

Page 7

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the
- organization and any related organizations

 List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

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

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

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

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

(A) (B) (C) (D) (E) (F)

Page 8

Nar	(B) Average hours per week (list any hours	than o	ne bo	ox, u n off	t che inles ficer	and a	on	Repo compo froi organiz	rom the forg		(E) Reportable compensatior from related organizations (1	w-	(F Estim amount o compen from	ated of other sation the	
		for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/109	A-MI2C	·)	2/1099-MISC)	organızat relat organız	ted
See Additional Data	Table														
													_		
1b Sub-Total															
					-					126,993		4,00	0		262,765
	er of individuals (including le compensation from the o			e liste	ed at	DOVE	e) who	rece	eived mo	re than	\$10	00,000			
		· .												Yes	No
_	anization list any former c 'Yes," complete Schedule J			ee, Ke •	∍y er •	mpic •	oyee, d	or hi	ghest cor	npensa	ted •	employee on	3		No
	ividual listed on line 1a, is n and related organizations											the	4	Yes	
	son listed on line 1a received									tion or i	ındı	vidual for			
	ndependent Contract		CC SCII	cuuic	- 10	, <i>3</i> u	icii pei	3011	• •		<u> </u>	· · ·	5		No
1 Complete th	nis table for your five highe ganization Report compen	est compensate											nper	nsation	
		(A) nd business addre		•								(B) uption of services		(Compe	C) nsation
NBC UniversalGolf Cl 7580 Golf Channel D ORLANDO, FL 32819	rive									Televisio	n Sv	/CS		16	5,482,025
Eiger Marketing Grou 165 W Putman Aven GREENWICH, CT 06	ue									Event Op	ps			3	3,003,127
R2 Innovative Techn 3380 Fairlane Farms WELLINGTON, FL 33	ologies, Road Ste 9									Event Op	ps				959,575
GoVision, 8291 Gateway Dr Sto ARGYLE, TX 76226										Event Op	ps				918,358
GGM International LI 4237 N Damen Ave CHICAGO, IL 60618	•									Event Op	os				618,181

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 19

Part	VI	Statement of Check if Schedul		a recn	onco or n	ote to any	lina in th	uc Port VIII					
		Check ii Schedul	e o contains	a resp	onse or n	lote to any	(/	A) evenue	Rela ex fur	(B) ated or empt action	(C) Unrelated business revenue	;	(D) Revenue excluded from x under sections
	1	1a Federated campaig	ns	1a					rev	renue			512 - 514
nts nts	ľ	b Membership dues		1b	<u>l</u> [
Contributions, Gifts, Grants and Other Similar Amounts		c Fundraising events		1c	<u> </u>								
, (S, (d Related organization		1d	<u> </u>								
is Is		e Government grants (c		1e	1								
ıs,		f All other contributions	,	_ <u></u> -	<u>l</u> [
er S		and similar amounts n above		1f									
릁美		g Noncash contribution	ons included										
ع الح الح		in lines 1a - 1f \$											
ة ق	╧	h Total. Add lines 1a	-1f	•		<u> </u>		0					
ı.			_			Business	Code	76	794,770	76.79	94,770	0	0
an e		TOURNAMENT REVENUE				•	711300	<u> </u>	685,066		35,066	0	0
æ		b TELEVISION & MEDIA R				"	711300		646,427		16,427	0	
3		c CORPORATE SPONSORS					711300		503,778		3,778	0	
3		d MEMBERSHIP & OTHER	INCOME				711300	<u> </u>	543,592		13,592	0	
an	'	e EDUCATION/PROF DEV					711300		343,332		13,332		
Program Service Revenue		f All other program se	rvice revenue	2									
۵	ę	g Total. Add lines 2a-2	2f		>	126,2	73,633						
	3	Investment income (i			ınterest,			240,13	3				240,133
	4	sımılar amounts) I Income from ınvestm	ent of tax-exe		ond proc	eeds ►			0			+	
		Royalties				. ▶	<u> </u>	-	0				
			(ı) Rea	(II) F	Personal								
	6	a Gross rents											
		b Less rental expenses											
		c Rental income or		0		0							
		(loss)											
		d Net rental income o						-	0			\rightarrow	
	7	a Gross amount	(ı) Securi	ties	(11)	Other							
		from sales of assets other				100							
		than inventory											
		b Less cost or other basis and											
		sales expenses C Gain or (loss)				100							
		d Net gain or (loss)				•	1	10	О				100
	8	Gross income from f (not including \$	_	ents of									
Other Revenue		contributions reporte	ed on line 1c)]								
eve		See Part IV, line 18				0							
r R		b Less direct expense c Net income or (loss)		b sına ev	ents .		J		0				
the		a Gross income from g	jaming activit						+			_	
0		See Part IV, line 19		a	}	0							
		b Less direct expense	·s	b		0							
		c Net income or (loss)		activit	ies .	. •	J		o				
	10	DaGross sales of invent returns and allowand											
		recarris and anomark		а	}	0							
		b Less cost of goods s	sold	b		0							
		C Net income or (loss)		f inven				-	0				
	1	Miscellaneous . 1 a	Kevenue		Busin	ess Code							
		b											
		с											
		d All other revenue .											
		e Total. Add lines 11a	-11d			>			0				
	1	. 2 Total revenue. See	Instructions	<u>.</u> .		· ►		126,513,86	6	126,273,63	3	0	240,233
	_												orm 990 (2018)

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

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	nizations must com	plete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .			<u> \square</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	720,288			
2 Grants and other assistance to domestic individuals See Part IV, line 22	0			
Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	0			
4 Benefits paid to or for members	650,000			
5 Compensation of current officers, directors, trustees, and key employees	7,389,758			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	5,552,395			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	217,869			
9 Other employee benefits	891,868			
10 Payroll taxes	628,593			
11 Fees for services (non-employees)				
a Management	0			
b Legal	340,227			
c Accounting	342,043			
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	980,310			
12 Advertising and promotion	718,138			
13 Office expenses	126,406			
14 Information technology	0			
15 Royalties	0			
16 Occupancy	269,516			
17 Travel	2,915,250			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials •	0			
19 Conferences, conventions, and meetings	0			
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	1,389,978			
23 Insurance	478,060			
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a PRIZE MONEY	57,483,766			
b TELEVISION & MEDIA	18,238,081			
c CORPORATE SPONSOR	16,016,646			
d TOURNAMENT EXPENSE	8,569,276			
e All other expenses	2,281,005			
25 Total functional expenses. Add lines 1 through 24e	126,199,473			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Page **11**

1,301,938

71.886.362 15,059,661

18.979.414 0

12.718.559

19

21

23

24

25

26

27 28

29

30

31 32

33

34

0

0 20 0

0 22

0

0

24,324,940

53.197.194

14.307.587

14,307,587

67,504,781

0

0

0

0

0

23,225,307

57.264.382

14.621.980

14,621,980

71,886,362

Form **990** (2018)

0

0

Form 990 (2018)

20

21

23

24

26

27

28

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31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			8,119,867	1	5,293,805
	2	Savings and temporary cash investments .	23,394,226	2	27,425,022		
	3	Pledges and grants receivable, net	0	0 3			
	4	Accounts receivable, net	5,043,448	4	8,870,980		
	5	Loans and other receivables from current and for trustees, key employees, and highest compensa Part II of Schedule L		0	5	0	
s	6	Loans and other receivables from other disqualisection 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L	(c)(3)(B), and f section 501(c)(9) structions) Complete	0	6	0	
ssets	′	Notes and loans receivable, net			0	7	0
S	8	Inventories for sale or use		ŀ		8	0
_	9	Prepaid expenses and deferred charges			395,076	9	860,878
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	16,127,972			
	ь	Less accumulated depreciation	10 b	11,219,540	4,823,892	10 c	4,908,432
	11	Investments—publicly traded securities .		24,324,940	11	23,225,307	
	12	Investments—other securities See Part IV, line		0	12	0	
	13	Investments—program-related See Part IV line	. 11	İ	0	13	0

9 Prep 10a Land basis b Less 11 Inve 12 Inve 13 Inve 14 Intal 15 Othe 16 Tota 17 Acco	inventories for sale of use		•	· · · · · · · · · · · · · · · · · · ·	•	
9	Prepaid expenses and deferred charges			395,076	9	
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	16,127,972			
b	Less accumulated depreciation	10 b	11,219,540	4,823,892	10c	
11	Investments—publicly traded securities .	24,324,940	11	2		
12	Investments—other securities See Part IV, line	0	12			
13	Investments—program-related See Part IV, line	0	13			
14	Intangible assets			1,403,332	14	
15 Other assets See Part IV, line 11				0	15	
16	Total assets.Add lines 1 through 15 (must equ	34)	67,504,781	16	7	
17	Accounts payable and accrued expenses			16,153,695	17	1
18	Grants payable			0	18	
	10a b 11 12 13 14 15 16	9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation 11 Investments—publicly traded securities . 12 Investments—other securities See Part IV, line 13 Investments—program-related See Part IV, line 14 Intangible assets	9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation 11 Investments—publicly traded securities . 12 Investments—other securities See Part IV, line 11 . 13 Investments—program-related See Part IV, line 11 . 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets.Add lines 1 through 15 (must equal line 17 Accounts payable and accrued expenses	9 Prepaid expenses and deferred charges	9 Prepaid expenses and deferred charges	9 Prepaid expenses and deferred charges

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3a

3b

No

Form 990 (2018)

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 75-0055465

Name: Ladies Professional Golf Association

Form 990 (2018)

Form 990, Part III, Line 4a:

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

Form 990, Part III, Line 4b:

MEMBERSHIP INCLUDING A NATIONAL CHAMPIONSHIP, TEAM CLASSIC AND OTHER REGIONAL TOURNAMENTS, as well as a qualifying tournament series for LPGA tour

THE LADIES PROFESSIONAL GOLF ASSOCIATION IS INVOLVED IN HOSTING A NUMBER OF TOURNAMENTS FOR ITS LPGA TEACHING AND CLUB PROFESSIONAL (T&CP)

membership

Form 990, Part III, Line 4c: THE LADIES PROFESSIONAL GOLF ASSOCIATION IS INVOLVED IN THE DEVELOPMENT OF A NUMBER OF EDUCATIONAL AND INSTRUCTIONAL PROGRAMS FOR ITS MEMBERS. AND OTHERS IN THE GOLF INDUSTRY

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation and a director/trustee)

organization

80,661

840,194

122,930

organizations

from the

17,886

0

0

0

any hours

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

	formulated	and a director/trustee)						01 ga1112at1011	/W/ 3/4000	mom the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Peter Carfagna Chairperson	3 0	x						0	0	0
Jon Iwata Director	2 0	х						0	0	0
Diane Gulyas Director	2 0	×						0	0	0
David Fay Director	2 0	×						0	0	0
Tom Schoewe Director	2 0	×						0	0	0

Peggy Mulligan

Director

Austin Ernst

Gerina Piller

Player/Director

Player/Director

Christina Kim

Player/Director

Vicki Goetze-Ackerman

President/Player/Director

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated amount of other than one box, unless hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

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

	any nours	. 1 . 4						(14, 2,4,000	(IV 2/4000	110111 the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
Morgan Pressel Player/Director	5 0	x						141,346	0	0	
Sarah Jane Smith Player/Director	5 0	х						263,940	2,500	0	
Marina Alex Player/Director	5 0	х						847,829	0	0	
Deb Vangellow	2 0	×						30,650	1,500	0	

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2 0 40 0

2 0 40 0

20 0 40 0

0 0

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1,176,119

323,776

324,122

303,150

288,383

297,227

0

0

0

25,893

23,224

14,474

23,036

19,542

23,841

	0.0		
Deb Vangellow	2 0		
		X	
Member/Director	0 0		
Michael Whan	40 0		
		X	
Commissioner	1 0		
Kathryn Milthorpe	40 0		
· '			l

and Independent Contractors

CFO/Treasurer

Marian Moore

CLO/Secretary

Heather Daly-Donofrio

Chief Tourn Ops Officer

Chief Teaching Officer

Chief Bus Officer - Symetra

Nancy Henderson

Michael Nichols

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation

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

	fan valatad					ustee)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Kelly Hyne	40 0									
Chief Sales Officer	0 0				×			235,385	0	12,320
Ricki Lasky Chief Tournament Bus Officer	40 0				x			253,934	0	24,681
Jin Pyun	40 0									
Chief Bus Officer - Asia	0 0				×			207,248	0	6,860
Jon Podany - Thru 92018 Chief Commercial Officer	40 0				×			448,119	0	16,386
D C	40.0									

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208,636

217,673

175,253

172,655

167,763

0

19,474

5,860

16,094

7,602

5,592

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0.0 40 0

0 0

Chief Commercial Officer Brian Carroll	Jon Podany - Thru 92018	Γ
Brian Carroll	Chief Commercial Officer	
	Brian Carroll	
Sr VP TV/New Media	Sr VP TV/New Media	

Dennis Baggett

David Lafrennie

Wendy Caves

Stasia Collins

VP - LPGA Properties

VP Sales - Symetra

VP Human Resources

Sr VP Tour Operations

and Independent Contractors

SCHEDULE C

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

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

Political Campaign and Lobbying Activities

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

Schedule C (Form 990 or 990-EZ) 2018

Cat No 50084S

DLN: 93493319110889

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-

EZ)

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

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

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

Open to Public Inspection

f the	Section 527 organizations Complete organization answered "Yes" or Section 501(c)(3) organizations that Section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form 99 t have filed Form 5768 (election under si t have NOT filed Form 5768 (election un n Form 990, Part IV, Line 5 (Proxy Tax s), then	90-EZ, Part VI, Iir ection 501(h)) Co der section 501(h	ne 47 (Lobbying Activ Implete Part II-A Do no I)) Complete Part II-B	ities), ot com Do no	plete Part II-l t complete Pa	art II-A
	me of the organization les Professional Golf Association	·		Employer i	denti	fication nun	nber
Lau	les Professional Golf Association			75-0055465	i		
Par	t I-A Complete if the orga	nization is exempt under sectio	n 501(c) or is	a section 527 orga	aniza	ition.	
1	Provide a description of the organ "political campaign activities")	nization's direct and indirect political cam	npaign activities ir	n Part IV (see instructio	ns for	definition of	
2	Political campaign activity expend	litures (see instructions)		•	\$		
3	Volunteer hours for political camp	• •					
Par	t I-B Complete if the orga	nization is exempt under sectio	n 501(c)(3).				
1	Enter the amount of any excise to	ax incurred by the organization under se	ction 4955	>	\$		
2	Enter the amount of any excise to	ax incurred by organization managers ur	nder section 4955	>	\$		
3	If the organization incurred a sec	tion 4955 tax, did it file Form 4720 for t	hıs year?			☐ Yes	□ No
4a	Was a correction made?					☐ Yes	□ No
b	If "Yes," describe in Part IV						
Par	t I-C Complete if the orga	nization is exempt under sectio	n 501(c), exce	ept section 501(c)	(3).		
1	Enter the amount directly expend	ed by the filing organization for section	527 exempt funct	ion activities	\$		
2	Enter the amount of the filing org function activities	anization's funds contributed to other or	rganızatıons for se	ection 527 exempt	\$		
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and on	Form 1120-POL,	line 17b ►	\$		
4	Did the filing organization file For	m 1120-POL for this year?				☐ Yes	□ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere ee (PAC) If additional space is needed,	ount paid from the ed to a separate p	filing organization's fu olitical organization, su	nds A	Iso enter the	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization's funds If none, ente -0-	5	(e) Amount contributions and promp directly deliv separate p organization enter	s received otly and vered to a political If none,
l							
2							
3							
1							
5							
5							

Grassroots ceiling amount

501(c)(6).

answered "Yes."

Dues, assessments and similar amounts from members

Supplemental Information

expenses for which the section 527(f) tax was paid).

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Schedule C (Form 990 or 990-EZ) 2018

activity

Volunteers?

1

b

Part III-A

1

2

c Total

Part IV

3

Current year

Carryover from last year

expenditure next year?

Return Reference

(b)

Amount

(a)

No

Yes

1

2a

2b

2c

3

4 5

Schedule C (Form 990 or 990EZ) 2018

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

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

Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B

Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

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

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is

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

Explanation

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Yes No

No

No

No

740,748

46,750

46,750

46,750

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE D**

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

(Form 990)

Department of the Treasury

Internal Revenue Service

Cat No 52283D

Schedule D (Form 990) 2018

DLN: 93493319110889 OMB No 1545-0047

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 the latest information.

Open to Public Inspection

	me of the organization les Professional Golf Association		Employer identification number
			75-0055465
PF	Organizations Maintaining Donor Adv Complete if the organization answered "Y		or Accounts.
		(a) Donor advised funds	(b)Funds and other accounts
	Total number at end of year		
	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
	Aggregate value at end of year		
	Did the organization inform all donors and donor advisorganization's property, subject to the organization's e		Ivised funds are the
	Did the organization inform all grantees, donors, and or charitable purposes and not for the benefit of the dono private benefit?		
Pa	rt II Conservation Easements. Complete if t	the organization answered "Yes" on Forr	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the organization	anızatıon (check all that apply)	
	\square Preservation of land for public use (e g , recreation	on or education) $\hfill \square$ Preservation of an	historically important land area
	Protection of natural habitat	Preservation of a c	certified historic structure
	Preservation of open space		
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	a qualified conservation contribution in the for	rm of a conservation Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified histo	rıc structure ıncluded ın (a)	2c
d	Number of conservation easements included in (c) acquistructure listed in the National Register	uired after 7/25/06, and not on a historic	2d
	Number of conservation easements modified, transfer tax year ▶	red, released, extinguished, or terminated by	the organization during the
	Number of states where property subject to conservat	ion easement is located ►	
	Does the organization have a written policy regarding and enforcement of the conservation easements it hold		of violations, Yes No
	Staff and volunteer hours devoted to monitoring, inspe	ecting, handling of violations, and enforcing co	onservation easements during the year
	Amount of expenses incurred in monitoring, inspecting \$	g, handling of violations, and enforcing conser	vation easements during the year
	Does each conservation easement reported on line 2(c and section $170(h)(4)(B)(II)^2$	d) above satisfy the requirements of section 1	70(h)(4)(B)(ı)
	In Part XIII, describe how the organization reports cor balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	e footnote to the organization's financial state	nse statement, and ements that describes
ar	Organizations Maintaining Collections Complete if the organization answered "Y	s of Art, Historical Treasures, or Oth	er Similar Assets.
a	If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held fo provide, in Part XIII, the text of the footnote to its final	.16 (ASC 958), not to report in its revenue sta or public exhibition, education, or research in f	
b	If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for pu following amounts relating to these items		
((i) Revenue included on Form 990, Part VIII, line 1		▶ \$
(i	ii)Assets included in Form 990, Part X		▶ \$
	If the organization received or held works of art, historical following amounts required to be reported under SFAS		ncial gain, provide the
а	Revenue included on Form 990, Part VIII, line 1	-	▶ \$
h	Assets included in Form 990. Part X		<u> </u>

Par	t III	Organizations Ma	aintaining Col	lections o	of Art, H	istori	cal Tı	reası	ıres, or	Other	Similar A	ssets (continued)	
3		g the organization's acq s (check all that apply)	uisition, accessior	n, and other	records,	check a	any of	the fo	llowing t	hat are a	significant	use of its	collection	
а		Public exhibition				d		Loan	or excha	ange prog	grams			
b		Scholarly research				е		Othe	r					
С		Preservation for future	e generations											
4	Provi Part	ide a description of the XIII	organızatıon's col	ections and	l explain h	now the	ey furth	ner the	e organız	ation's e	xempt purpo	ose in		
5		ng the year, did the orga ts to be sold to raise fur									nılar	☐ Ye	es 🗆 N	lo
Pa	rt IV	Escrow and Cust Complete if the ord X, line 21.			" on Forr	n 990	, Part	IV, lı	ne 9, or	reporte	ed an amou	unt on f	orm 990,	Part
1a		e organization an agent ded on Form 990, Part)		an or other	ıntermedi	ary for	contril	bution	s or othe	er assets	not	☐ Ye	es 🗆 N	lo
b	If "Y	es," explain the arrange	ement in Part XIII	and comple	ete the fol	lowing	table		[Δ	mount		_
c		nning balance	ment in rait XIII	and comple	ete tile ioi	lowing	table		ŀ	1c		····ouric		_
d	_	tions during the year							ŀ	1d				_
е		ibutions during the year	-						ŀ	1e				_
f		ng balance							ŀ	1f				_
		-		000 0										_
2a		the organization include											s ∐ N	lo
		es," explain the arrange												
Pa	rt V	Endowment Fund	as. Complete if	tne organ (a)Currer			rior yea		n Form ' (c)Two ye				(e)Four yea	re back
1a	Beaini	ning of year balance .		(a)currer	it year	(0)-	погуеа	' 	(C) I WO ye	ears Dack	(d) Tillee ye	ars back	(e) our yea	II'S Dack
	_	butions												
		vestment earnings, gair	ns and losses											
		s or scholarships												
	Other	expenditures for facilities												
f	Admin	nistrative expenses .												•
g	End of	f year balance												
2	Prov	ide the estimated percei	ntage of the curre	nt year end	balance	(line 1d	g, colu	mn (a)) held a:	s	,	•		
а		d designated or quasi-e												
b	Perm	nanent endowment 🕨												
С	Tem	porarily restricted endov	wment ▶											
	The percentages on lines 2a, 2b, and 2c should equal 100%													
3а	orga	there endowment funds nızatıon by	•	sion of the	organızatı	on that	are h	eld an	d admını	stered fo	r the		Yes	No
	(i) u	inrelated organizations					•					<u> </u>	a(i)	
	(ii) related organizations													
Д 4		es on 3a(II), are the rel ribe in Part XIII the inte	-		•			•				. L	3b	<u> </u>
					ii s endow	/IIIeIIc I	unus							
e.	rt VI	Complete if the or			" on Forr	n 990	, Part	IV, lı	ne 11a.	See Fo	rm 990. Pa	art X, lır	ne 10.	
	Descr	ription of property	(a) Cost or oth (investme	er basıs	(b) Cost						depreciation		(d) Book valu	ie
1a	Land						35	50,000						350,000
		ngs						50,416			1,741,883			618,533
		hold improvements					_,50	-,.15			_,,000			
		ment					67	26,493			616,249			10,244
•	-4a.b.				I				1		-,	İ		,

12,791,063

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) .

3,929,655

4,908,432

8,861,408

Part VII Investments—Other Securities. Complete if the of See Form 990, Part X, line 12.	organization a	nswered "Ye	es" on Form 990, Pa	rt IV, line 11b.
(a) Description of security or category (including name of security)	(b Boo val	ok	(c) Method of v Cost or end-of-year	
(1) Financial derivatives (2) Closely-held equity interests (3)Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form	n 990, Part I	V, line 11c. :	See Form 990, Part	X, line 13.
(a) Description of investment	(b) Book va	alue	(c) Method of v Cost or end-of-year	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answered 'Ye	▶ es' on Form 990). Part IV. line	: 11d See Form 990. P	art X. line 15
(a) Description				(b) Book value
(1)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)				
Part X Other Liabilities. Complete if the organization answ See Form 990, Part X, line 25.				11f.
1. (a) Description of liability (1) Federal income taxes	,	_,	0	
MEMBERS' DEFERRED RETIREMENT BENEFITS (2)		23,22	5,307	
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions In Part XIII, provide the text of the	e footnote to the	23,22 ne organizatioi		s that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 740)				_

Part XI

2

b

b

5

1

2

3

b

5

Part XIII

See Additional Data Table

Part XII

Schedule D (Form 990) 2018

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

Investment expenses not included on Form 990, Part VIII, line 7b.

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Add lines **4a** and **4b**

Donated services and use of facilities . . .

Add lines 2a through 2d . .

Return Reference

Other (Describe in Part XIII)

Supplemental Information

Page 4

d	Other (Describe in Part XIII)	2d		-1,437,982		
	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1				3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1					

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

	,,,,,,	, ,	-,		٠ ا	_
2						
					a	4

2a

2b

2c

2a 2b

2c

2d

4a 4b

Explanation

es 2a through 2d		2e	-1,437,982
t line 2e from line 1		3	126,513,866
s included on Form 990, Part VIII, line 12, but not on line 1			
nent expenses not included on Form 990, Part VIII, line 7b	4a		
Describe in Part XIII)	4b		
es 4a and 4b		4c	
venue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	126,513,866
Reconciliation of Expenses per Audited Financial Statem	ents With Expenses per F	Return.	

124,761,491

124,761,491

1,437,982

126.199.473

Schedule D (Form 990) 2018

1

2e

3

4c

5

1.437.982

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	nation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID: **Software Version:**

EIN: 75-0055465

, Part XI, Line 2D OTHER REVENUE ITEMS ON FINANCIALS BUT NOT ON RETURN LOSS ON INVESTMENTS

Name: Ladies Professional Golf Association

Supplemental Information

Return Reference

Explanation Schedule D, Part X, Line 2 FIN 48 (ASC 740) FOOTNOTE INCOME TAXES - THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAX UNDER PROVISIONS OF SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE AND FROM STATE INCOME TAXES UNDER SIMILAR PROVISIONS OF THE FLORIDA INCOME TAX CODE. THE ASSOCIATION IDENTIFIES AND EVALUATES UNCERTAIN TAX POSITIONS, IF ANY, AND RECOGNIZES THE IMPACT OF UNCERTAIN TAX POSITIONS FOR WHICH THERE IS A LESS THAN MORE-LIKELY-THAN-NOT PROBABILITY OF THE POSITION BEING UPHELD WHEN REVIEWED BY THE RELEVANT TAXING AUTHORITY SUCH POSITIONS ARE DEEMED TO BE UNRECOGNIZED TAX BENEFITS AND A CORRESPONDING LIABILITY IS ESTABLISHED ON THE STATEMENT OF FINANCIAL POSITION THE ASSOCIATION HAS NOT RECOGNIZED A LIABILITY FOR UNCERTAIN TAX P OSITIONS IF THERE WERE AN UNRECOGNIZED TAX BENEFIT, THE ASSOCIATION WOULD RECOGNIZE INTER EST ACCRUED RELATED TO UNRECOGNIZED TAX BENEFITS IN INTEREST EXPENSE AND PENALTIES IN OPER ATING EXPENSES The Association's remaining open tax years subject to examination by the I nternal Revenue Service include the years ended December 31, 2014 through 2018 Schedule D

FOR PLAYER RETIREMENT PLANS' BENEFITS \$(1,437,982)

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 4B	Other Expense Items on Return but not on Financials Loss on investments for player retirement plans' benefits \$1,437,982

_ _ _

efile GRAPHIC prin	t - DO NOT F	PROCESS	As Filed Data -			DLN:	93493319110889
SCHEDULE F (Form 990)		ement of	Activities (Outside the United States			OMB No 1545-0047
(F01111 930)	ete if the organization answered "Yes" to Form 990, Part IV, line 14b, Attach to Form 990.					2018	
Department of the Treasury Internal Revenue Service So to				Open to Public Inspection			
Name of the organization Ladies Professional Golf						Employer iden 75-0055465	tification number
	Information , Part IV, line		s Outside the U	Inited States. Comple	te if the	organization a	nswered "Yes" to
-	the grantees'	eligibility for t		substantiate the amount stance, and the selection	_		☐ Yes ☐ No
outside the Unite	d States		·	dures for monitoring the		-	ner assistance
3 Activites per Region	n (The followin	ng Part I, line 3	table can be dupli	cated if additional space is	needed)	
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	program sp	vity listed in (d) is a n service, describe ecific type of ce(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data				,			
(2)							
(3)							
(4)							
(5)							
3a Sub-total b Total from continua Part I							11,648,760
c Totals (add lines 3	а анч эв) —			1			11,648,760

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

Cat No 50082W

Schedule F (Form 990) 2018

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

Part III

(4) (5) (6)

(7)

(8) (9)

(10) (11) (12) (13) (14) (15) (16)

(17) (18) Page **3**

Schedule F (Form 990) 2018

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash	(g) Description of non-cash	(h) Method of valuation
		, '	,		assistance	assistance	(book, FMV, appraisal, other)
(1)							

	. 55, p. 51105	545.1.	 assistance	assistance	(book, FMV, appraisal, other)
(1)					
/ 2\					

				appraisal, other)
(1)				
(2)				
(3)				

Sche	dule F (Form 990) 2018		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)		
		☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)		
	Corporations (see Instructions for Form 5471)	☐ Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(see Instructions for Form 6005)	☐ Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713, don't file with Form 990)	☐ Yes	✓ No

scneaule F (Forn	n 990) 2018	Page
Pro am me	nounts of investments vs.	uired by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method expenditures per region); Part II, line 1 (accounting method); Part III (accounting nn (c) (estimated number of recipients), as applicable. Also complete this part to provide
Re	eturnReference	Explanation

Schedule F (Form 990) 2018

Additional Data

Europe (Including Iceland and

Greenland)

Software ID: Software Version:

EIN: 75-0055465

Name: Ladies Professional Golf Association

Golf Competition

3,583,701

Form 990 Schedule F Par	t I - Activities	Outside The U	Inited States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific			Program Services	Golf Competition	7,952,765

Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region service(s) in region services, grants to region recipients located in the region) North America Program Services Golf Competition 300 Central America and the Program Services Golf Competition 111,994 Caribbean

DLN: 93493319110889 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number Ladies Professional Golf Association 75-0055465 Part I **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 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (1) See Additional Data (2) (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

(4)

Part IV

Return Reference

Schedule I, Part I, Line 2

Explanation

(5)

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

ARE NOT OTHERWISE DIVERTED FROM THE INTENDED USE ALL OTHER GRANTS ARE MADE TO UNRELATED ORGANIZATIONS

- (6)

(7)

THE LADIES PROFESSIONAL GOLF ASSOCIATION TOURNAMENT PLAYERS ELECT TO DONATE ALL PRO AM REVENUE RECEIVED BY THE LPGA FROM TOURNAMENT

SPONSORS TO THE LPGA FOUNDATION THE LADIES PROFESSIONAL GOLF ASSOCIATION MAKES SURE THAT ALL TRANSFERS ARE USED FOR PROPER PURPOSES AND

Schedule I (Form 990) 2018

Additional Data

Pottstown Health & Wellness

152 E High St Ste 500 Pottstown, PA 19464

Foundation

Software ID: Software Version: EIN: Name:

23-2344729

EIN: 75-0055465

Name: Ladies Professional Golf Association

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

501c3

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
United Way of Volusia County 3747 W Intl Speedway Blvd Daytona Beach, FL 32124	59-1099774	501c3	9,500				Donation

Donation

10,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ation

Donation

The Arington Foundation	31-1417811	501c3	17,500		Donatio
6125 Commerce Ct					
Mason, OH 45040					

30,000

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

501c3

National Golf Foundation

Jupiter, FL 33477

501 N Highway A1A Suite 401

36-2921655

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance tıon

Donation

Proactive Health Labs 303 N Glenoaks Blvd Ste 750	45-5242188	501c3	10,000		Donatio
Burbank, CA 91502					

15,143

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

501c3

World Golf Foundation

One World Golf Place Saint Augustine, FL 32092 59-2998925

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501c3 The LPGA Foundation 59-3085528 618.145 Donation 100 International Golf Drive

Daytona Beach, FL 32124

efil	e GRAPHIC pr	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	19331	9110	889
Sch	nedule J	Co	mpensati	ion Information	00	1B No	1545-0	0047
(For	m 990)	For certain Office	-					
		Complete if the org	Compensa anization answ	ited Employees vered "Yes" on Form 990, Part IV	, line 23.	20	18	}
Б	64 7		▶ Attach	to Form 990. instructions and the latest infor			o Pul	
•	tment of the Treasurv al Revenue Service	P do to <u>www.irs.go</u>	<i>V/ F01111990</i> 101	mstructions and the latest mion		Insp	ectio	n
	me of the organizaties Professional Golf				Employer identificat	ion nu	ımber	
Laui	les i rolessional con	Association			75-0055465			
Pa	rt I Questi	ons Regarding Compensat	tion					
							Yes	No
1a				the following to or for a person liste y relevant information regarding the				
		s or charter travel		Housing allowance or residence for	•			
	_	companions	片	Payments for business use of perso				
		nification and gross-up payments nary spending account	; ⊔ □	Health or social club dues or initiati Personal services (e.g., maid, chau				
	LI Discretion	nary spending account	Ц	Personal services (e g , maid, chau	rreur, cher)			
b		xes in line 1a are checked, did th all of the expenses described abo		ollow a written policy regarding payn iplete Part III to explain	nent or reimbursement	1b	Yes	
2				or allowing expenses incurred by all r, regarding the items checked in line	. 1.2	2	Yes	
	directors, truste	es, officers, including the CEO/E	xecutive Director	r, regarding the items checked in line	e Ia'			
3				ed to establish the compensation of to not check any boxes for methods	he			
	_	•		CEO/Executive Director, but explain	ın Part III			
	✓ Compensa	ation committee		Written employment centract				
		ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	\overline{\sqrt{2}}	Approval by the board or compensa	ition committee			
4		-	990, Part VII, Se	ction A, line 1a, with respect to the f				
	related organiza	ation			-			
а	Receive a sever	ance payment or change-of-cont	rol payment?			4a		No
b	•	r receive payment from, a suppl	•	· ·		4b		No
С	•	r receive payment from, an equi		-	L TTT	4c		No
	ir res to any c	or lines 4a-c, list the persons and	provide the app	olicable amounts for each item in Par	t 111			
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Section ontingent on the revenues of		the organization pay or accrue any				
а	The organization	n?				5a		
b	Any related orga	anization?				5b		
	If "Yes," on line	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section ontingent on the net earnings of		the organization pay or accrue any				
а	The organization	n?				6 a		
b	Any related orga					6b		
	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section escribed in lines 5 and 6? If "Yes		the organization provide any nonfixe rt III	d	7		
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8		
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follo	w the rebuttable	presumption procedure described in	Regulations section	9		
For F	Panerwork Redu	iction Act Notice, see the Ins	tructions for Fo	orm 990. Cat No. !	50053T Schedule J	(Form	990)	2018

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. the individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

For each individual whose compensation must be reported on Schedule J, report of instructions, on row (ii) Do not list any individuals that are not listed on Form 990 Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total	D, Part VII						vidual	
(A) Name and Title	(B) Break	(B) Breakdown of W-2 and/or 1099-MISC compensation			(D) Nontaxable benefits	columns	(F) Compensation in	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990	
See Additional Data Table								

Page Page								
Part III Supplemental Inform	rt III Supplemental Information							
rovide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information								
Return Reference	Explanation							

First Class travel privileges are provided to the Commissioner of the LPGA in accordance with LPGA travel policies and procedures

Schedule J, Part I, Line 1A

Return Reference	Explanation
	COMPENSATION FOR THE FOLLOWING BOARD MEMBERS WAS RELATED TO TOURNAMENT PRIZE WINNINGS RECEIVED IN CONJUNCTION WITH COMPETING IN LPGA TOURNAMENTS AND PROFESSIONAL SERVICES AUSTIN ERNST SARAH JANE SMITH MARINA ALEX

2018 Schedule 1

Software ID:

Software Version:

EIN: 75-0055465

Name: Ladies Professional Golf Association

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

Form 990, Schedule J						-		T
(A) Name and Title			of W-2 and/or 1099-MIS		(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B)
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Senents	(5)(1) (5)	reported as deferred on prior Form 990
Austin Ernst Player/Director	(1)	840,194	0	0	0	0	840,194	0
, .	(11)	0	0	0	0	0	0	0
Sarah Jane Smith Player/Director	(1)	263,940	0	0	0	0	263,940	0
, .	(11)	2,500	0	0	0	0	2,500	0
Marına Alex Player/Director	(1)	847,829	0	0	0	0	847,829	0
, ,	(11)	0	0	0	0	0	0	0
Michael Whan Commissioner	(1)	762,869	413,250	0	8,250	17,643	1,202,012	0
	(11)	0	0	0	0	0	0	0
Kathryn Milthorpe CFO/Treasurer	(1)	263,865	59,911	0	5,755	17,469	347,000	0
	(11)	0	0	0	0	0	0	0
Heather Daly-Donofrio Chief Tourn Ops Officer	(1)	250,275	52,875	0	5,629	17,407	326,186	0
Sind Your Spo Sinos	(11)	0	0	0	0	0	0	0
Nancy Henderson Chief Teaching Officer	(1)	232,710	55,673	0	7,040	12,502	307,925	0
emai reasining emise.	(11)	0	0	0	0	0	0	0
Marian Moore CLO/Secretary	(1)	268,815	55,307	0	6,932	7,542	338,596	0
ozo, secretar,	(11)	0	0	0	0	0	0	0
Michael Nichols Chief Bus Officer - Symetra	(1)	239,625	57,602	0	6,428	17,413	321,068	0
emer bas officer symetra	(11)	0	0	0	0	0	0	0
Kelly Hyne Chief Sales Officer	(1)	210,114	25,271	0	5,551	6,769	247,705	0
omer bares officer	(11)	0	0	0	0	0	0	0
Ricki Lasky Chief Tournament Bus	(1)	224,087	29,847	0	7,401	17,280	278,615	0
Officer	(11)	0	0	0	0	0	0	0
Jın Pyun Chief Bus Officer - Asia	(1)	183,081	24,167	0	0	6,860	214,108	0
	(11)	0	0	0	0	0	0	0
Jon Podany - Thru 92018 Chief Commercial Officer	(1)	335,646	112,473	0	5,614	10,772	464,505	0
cinci commercial officer	(11)	0	0	0	0	0	0	0
Brian Carroll Sr VP TV/New Media	(1)	182,115	26,521	0	6,259	13,215	228,110	0
· ·	(11)	0	0	0	0	0	0	0
Dennis Baggett VP - LPGA Properties	(1)	201,346	16,327	0	4,604	1,256	223,533	0
· ·	(11)	0	0	0	0	0	0	0
David Lafrennie VP Sales - Symetra	(1)	152,975	22,278	0	4,022	12,072	191,347	0
1. Saids Symetra	(11)	0	0	0	0	0	0	0
Wendy Caves VP Human Resources	(1)	151,995	20,660	0	5,004	2,598	180,257	0
	(11)	0	0	0	0	0	0	0
Stasia Collins Sr VP Tour Operations	(1)	167,763	0	0	0	5,592	173,355	0
· ·	(11)	0	0	0	0	0	0	0
			-		-		-	

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epartment of the Treaternal Revenue Serv	I .		⊳ Go t	o <u>ww</u> ı	v.irs.g	ov/Form990	for the lates	st informatio	n.			(Open		ublic
Name of the org Ladies Professional	anızatıon	ion								•	yer ide 5465	entifica			
			•					501(c)(29) or 25b, or Form	rganız	ations	s only)	ne 40b			
) Name of d	_			$\overline{}$	elationship be		lified person ai		(c) [escript ansacti	on of) Cori	rected [®]
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otal	l			l		•	\$				l	l			
	nplete if th	e orga		swere between and	ed "Ye: een	sted Person s" on Form 9 (c) Amount o	990, Part IV,	line 27.	of assi	stanc	ce	(e) Pu	rpose	of assi	ıstance

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh organiz rever	of zation's
				Yes	No
See Addıtıonal Data Table					

PART IV BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS

PLEASE SEE SCHEDULE O FOR

ADDITIONAL INFORMATION FOR

Part V

Explanation

Schedule L (Form 990 or 990-EZ) 2018

Provide additional information for responses to questions on Schedule L (see instructions) Return Reference

Supplemental Information

Additional Data

Vicki Goetze-Ackerman

Austin Ernst

	Software Version.		
	EIN:	75-0055465	
	Name:	Ladies Professi	ional Golf Association
Form 990, Schedule L, Part IV - Busi	iness Transactions Involvi	ng Interested	Persons
(a) Name of interested person	(b) Relationship between interested person and the	(c) Amount of transaction	(d) Description of transaction

organization

Player/BOD

Player/BOD

Software Version:

98,547

840,194 Prize winnings

Professional services

(e) Sharing of organization's

revenues?

No

No

No

Yes

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction person and the organization's organization revenues? es/ No Nο

141.346 Prize winnings

No

				Ye
Christina Kim	Player/BOD	122,930	Prize winnings	

Plaver/BOD

Morgan Pressel

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction person and the organization's organization revenues? Yes No Sarah Jane Smith Nο Plaver/BOD 263,940 | Prize winnings

847.829 Prize winnings

No

	١

Plaver/BOD

Marina Alex

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction person and the organization's revenues? organization

30,650 Stipend

No

person and the organization organization Ves. No.

Member/BOD

Deb Vangellow

efile GRAPH	IC print -	DO NOT PROCESS	As Filed Data -			DLN: 93493319110889
SCHEDUL (Form 990 or EZ)	2018 Open to Public Inspection					
Namel ਲਵਿਸ਼ਾਹਿੰਦ Ladies Professional 990 Schedule	75-005546	r identification number 65				
Return Reference	, Jupp.			Explanation		
Members or Stockholders		Part VI, Line 6 The mem t players and Teaching a		fessional Golf Association are t	the	

Return Explanation
Reference

Members or Stockholders who may elect

Return
Reference

Decisions

Form 990, Part VI, Line 7b The Ladies Professional Golf Associations bylaws reserve to the

Subject to members the power to amend, repeal or restate the Constitution Form 990 Review Process F orm 990, Part VI, Line 11b The Form 990 is prepared by an independent accounting firm in c onjunction with the Ladies Professional Golf Association's management. The return is reviewed by Management prior to distribution to the full board of Directors for information pur poses prior to filing.

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

Return Explanation
Reference

Process FOR determining compensation of the Commissioner This recommendation is based on the following methods independent compensation consulting, comparable industry knowledge, and market surveys. The Human Resources committee recommends to the entire Board of Directors the Commissioner's base salary, benefits and performance bonus, if certain goals are met

Return Explanation
Reference

PROCESS FOR DETERMINING COMPENSATION Form 990, Part VI, Line 15b The Commissioner is charged with conducting performance review s of officers and key employees to determine base salary, benefits and performance bonus, if goals are met. The procedures used to determine compensation include the following and ependent compensation consulting, comparable industry knowledge, and market surveys.

990 Schedule O, Supplemental Information

Return Explanation

Reference

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

Return Explanation
Reference

LINE 19

FORM 990, No governing documents, conflict of interest policy or financial statements are available to the public PART VI, SECTION C.

Return Explanation

Form 990,
Part VII,
Column E

Nancy Henderson is an employee of the LPGA and receives her Form W-2 from the LPGA Ms. He
nderson provides services both to the LPGA and to its related organization, the LPGA Found
ation. In the interest of clarity, the LPGA is reporting that 50% of Ms. Henderson's compe

nsation is attributable to services rendered to the LPGA Foundation.

990 Schedule O, Supplemental Information

Return Reference	Explanation
BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS	Schedule L, Part IV (A) NAME OF PERSON VICKI GOETZE-ACKERMAN (B) RELATIONSHIP BETWEEN INT ERESTED PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION \$98,547 (D) DESCRI PTION OF TRANSACTION THE TRANSACTION BETWEEN VICKI GOETZE-ACKERMAN AND LADIES PROFESSIONA L GOLF ASSOCIATION RELATES TO PROFESSIONAL SERVICES AS LPGA TOUR PRESIDENT (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON AUSTIN ERNST (B) RELATIONSHIP BETWEEN PER SON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION \$840,194 (D) DESCRIPTION OF T RANSACTION THE TRANSACTION BETWEEN AUSTIN ERNST AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PRIZE WINNINGS RECEIVED FROM COMPETING IN LPGA TOURNAMENTS (E) SHARING OF ORGA NIZATION REVENUES? = NO (A) NAME OF PERSON CHRISTINA KIM (B) RELATIONSHIP BETWEEN PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION \$122,930 (D) DESCRIPTION OF TRANS ACTION THE TRANSACTION BETWEEN CHRISTINA KIM AND LADIES PROFESSIONAL GOLF ASSOCIATION REL ATES TO PRIZE WINNINGS RECEIVED FROM COMPETING IN LPGA TOURNAMENTS (E) SHARING OF ORGANIZ ATION REVENUES? = NO (A) NAME OF PERSON MORGAN PRESSEL (B) RELATIONSHIP BETWEEN PERSON AND D ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION S141,346 (D) THE TRANSACTION BETWEE NO MORGAN PRESSEL AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PRIZE WINNINGS RECEIVED FROM COMPETING IN LPGA TOURNAMENTS (E) SHARING OF ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION S141,346 (D) THE TRANSACTION BETWEE NO MORGAN PRESSEL AND LADIES PROFESSIONAL GOLF ASSOCIATION RELATES TO PRIZE WINNINGS RECEIVED FROM COMPETING IN LPGA TOURNAMENTS (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON SARAH JANE SMITH (B) RELATIONSHIP BETWEEN PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION \$263,940 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEE PERSON AND ORGANIZATION PLAYER/BOD (C) AMOUNT OF TRANSACTION \$263,940 (D) DESCRIPTION OF TRANSACTION THE TRANSACTION BETWEE NAME OF PERSON MARINA ALEX AND LADIES PROFESSIONAL GOLF ASSOCIATION ORGANIZATION MEMB

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R**

(Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

DLN: 93493319110889 OMB No 1545-0047

> Open to Public Inspection

Name of the organization Ladies Professional Golf Association	Employer identification number							
Ladies Professional Golf Association				75-0055465				
Part I Identification of Disregarded Entities Complete if the	e organization answer	red "Yes" on Form 9	90, Part IV, line 3	3.				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total Income	(e) End-of-year assets	(f) Direct controlling entity)		
(1) FGTA LLC 100 International Golf Drive Daytona Beach, FL 32124 26-0507044	Develop Tour	FL	6,688,901	2,753,969	LPGA		_	
(2) LPGA Tourn Prop One LLC 100 International Golf Drive Daytona Beach, FL 32124 27-1317091	Golf Events	FL	9,204,104	6,136,860	LPGA			
(3) LPGA Asia LLC 100 International Golf Drive Daytona Beach, FL 32124 46-2753637	Marketing	FL	570,211	141,677	LPGA			
							_	
							-	
Part II Identification of Related Tax-Exempt Organizations related tax-exempt organizations during the tax year.	Complete if the organ	nization answered "\	Yes" on Form 990,	Part IV, line 34 b	ecause it had one or	more		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co ent	g) 512(b) ntrolled ity?	
(1)THE LPGA FOUNDATION 100 International Golf Drive	GOLF/SCHOL	FL	501(c)(3)	12-I	LPGA	Yes	No	
Daytona Beach, FL 32124 59-3085528								
For Paperwork Reduction Act Notice, see the Instructions for Form 990	<u> </u>	Cat No 50135			Schedule R (Form	990) 34	118	

		(state or foreign country)	controlling entity	income(rela unrelated excluded fr tax unde sections 51 514)	d, rom r	ne end-of-year assets	alloca	rtionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	parti	ner?	Percent owners
							Yes	No		Yes	No	
ations Taxable as a C rganizations treated as	 Corporation a corporation	or Trus on or tru	it Complete st during th	l if the organe tax year	anızatıon an	 swered "Yes	" on Fo	l orm 99	l 90, Part IV,	line	34	
(b) Primary activity	Lo dor (state)	.egal mıcıle or foreıgn			(e) Type of entity C corp, S corp, or trust)	(f) Share of total income		year	of- Perce	ntage	(13	(i) ction ! 3) con entit
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				+							+	\dashv
	rganizations treated as	(b) Primary activity Compared to the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the composition of the 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of the composition of the composition of the composition of the composition	rganizations treated as a corporation or tru	(b) Primary activity (c) Legal domicile (state or foreign	(b) Primary activity (c) Legal domicile (state or foreign (d) Direct controlling entity (d) Direct controlling entity	(b) Primary activity (c) Legal domicile (state or foreign (d) Direct controlling entity (C corp, S corp, or trust)	(b) (c) (d) (e) (f) Share of total domicile (state or foreign	(b) Primary activity (c) Legal domicile (state or foreign (d) Direct controlling entity (C corp, S corp, or trust) (e) Type of entity (C corp, S corp, or trust) (f) Share of total income	(b) (c) (d) (e) (f) (g) (Primary activity Legal domicile (state or foreign (state or foreign (state or foreign (state or foreign (state or foreign (state or foreign (state or foreign (state or foreign (state or foreign (state or foreign (state or foreign (state or foreign (state or foreign (state or foreign (state or foreign (state or 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(1)The LPGA Foundation

(2)The LPGA Foundation

(3)The LPGA Foundation

(4)The LPGA Foundation

(5)The LPGA Foundation

Dividends from related organization(s)

Sale of assets to related organization(s).

Purchase of assets from related organization(s) .

Exchange of assets with related organization(s). .

Lease of facilities, equipment, or other assets to related organization(s) . . .

Reimbursement paid by related organization(s) for expenses . . .

(b)

Transaction type (a-s)

q, o

q, n

Amount involved

618,145

67,336

1,392,018

2.496.100

280,000

Gıft

Due to Entity

Reimbursement

Reimbursement

Due from Entity

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

Name of related organization

No No

No

No

No No

No

No

No

No

No

No

1f

1h

11

1m

1n Yes

1o Yes

1q |

1r Yes

1s

Schedule R (Form 990) 2018

(d)

Method of determining amount involved

Yes

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.									
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No						
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?									
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No						
b Gift, grant, or capital contribution to related organization(s)	1b	Yes							
a. Cift, grant, or capital contribution from related organization(s)	10	\Box	No						

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b		1b
c	Gift, grant, or capital contribution from related organization(s)	10
d		10
e	Loans or loan guarantees by related organization(s)	16

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

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

													
(a) Name, address, and EIN of entity	(b) Primary activity		(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	Ar or	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		or ig ?	(k) Percentage ownership
İ			514)	Yes	No	ļ		Yes	No		Yes	No	
									_	Schedul	e R (Form	1 990)) 2018

