Form 990

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.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A F	or th	e 2023 cale	endar year, or tax year beginning		and end	ing					
ь.			C Name of organization					D Em	ployer ide	ntification	number
_	heck if a	applicable:	USA GOLF FEDERATION,	INC.							
	Addre	ss change	Doing business as					45-	-43196	43	
	Name	change	Number and street (or P.O. box if ma	r and street (or P.O. box if mail is not delivered to street address) Room/suite							
	Initial	return	1 PGA TOUR BLVD					(9)	04)285	5-3700)
	Final r	eturn/terminated	City or town, state or province, coun	try, and ZIP or foreign postal cod	е			G Gro	ss receipt	\$\$	
	Amend	ded return	PONTE VEDRA BEACH, FI	32082						275,	000.
	Applic	ation pending	F Name and address of principal office	r: ANDY LEVINSON			H(a) Is this a group	return for	Ye	
	_		1 PGA TOUR BLVD, PONT		L 32082		H(subordinates? (b) Are all subordi	nates included	? Ye	\equiv
$\overline{}$	Tax-ex	cempt status:	X 501(c)(3) 501(c) (17(a)(1) or	527		If "No," attac			
	Webs	· ·	W.TEAMUSA.ORG/USA-GOI		(u)(.) o.	102.	— н	c) Group exem	ntion numbe	er	
_		of organization		Association Other		I Year of fo		: 2011 M			le: FL
_	art I	Summ		713300Idiloi1		L rear or io	mation	. 2011 111	otate of te	gai dominion	<u>с. г.п</u>
	1		<u> </u>	r most significant activities:							
•	'		scribe the organization's mission of	_	GOT EL GO	MDDDTDT	· O N T				
ũ		10 FOS	TER NATIONAL OR INTER	MATIONAL AMATEUR	GOLF CO	MERITII	.OIV.				
rna		<u> </u>						0.50/ /			
Governance	2	Check this		discontinued its operations					1 1	assets.	_
	3		f voting members of the governing						3		6
Activities &	4		f independent voting members of t						4		6
Ϋ́	5		ber of individuals employed in cale						5		NONE
Ę	6		ber of volunteers (estimate if necess						6		NONE
⋖			lated business revenue from Part V						7a		
	b	Net unrela	ated business taxable income from I	Form 990-T, Part I, line 11					7b		
							F	Prior Year		Current	Year
ø	8	Contribution	ons and grants (Part VIII, line 1h) .					50,00	00.	25	0,000.
Revenue	9	Program s	ervice revenue (Part VIII, line 2g) .				N	ONE		NONE	
ě	10	Investmen	it income (Part VIII, column (A), line	es 3, 4, and 7d)				N	ONE		NONE
Œ	11	Other reve	enue (Part VIII, column (A), lines 5,	6d, 8c, 9c, 10c, and 11e)				25,00	00.	2	25,000.
	12	Total reve	nue - add lines 8 through 11 (must	equal Part VIII, column (A), I	ine 12)			75,00	00.	27	75,000.
	13	Grants an	d similar amounts paid (Part IX, colu	ımn (A), lines 1-3)				50,00	00.		NONE
	14		aid to or for members (Part IX, colu						ONE		NONE
s	15		other compensation, employee bene		No	ONE		NONE			
Expenses	16 a		nal fundraising fees (Part IX, column	No	ONE		NONE				
- be	b		raising expenses (Part IX, column (I			TOTAL					
û	17		enses (Part IX, column (A), lines 11					31,72	27.		12,694.
	18		enses. Add lines 13-17 (must equal					81,72			12,694.
	19		ess expenses. Subtract line 18 from					-6,72			32,306.
es		TKCVCIIGC I	COO EXPENSES. Cubitact into 10 from	111110 12			eainnin	g of Current		End of \	
Net Assets or Fund Balances	20	Total assa	ts (Part X, line 16)					713,66			59,213.
\ss Bal	21		ities (Part X, line 26)					12,70			25,952.
und/	22		s or fund balances. Subtract line 21			••••⊢		700,95			3,261.
	rt II		ture Block	Hom line 20				700,95)	93	3,201.
			rjury, I declare that I have examined thi	is return including accompanyi	na echadulae i	and statemen	ate and	to the heet of	my know	ledge and	helief it is
true	e, corre	ect, and comp	plete. Declaration of preparer (other than	officer) is based on all informat	ion of which p	reparer has a	ny know	ledge.	my know	icage and	Delici, it is
		Andi	Levinson					11/7/	2024		
Sig	ın	Signature						Date			
He		- 0		_			mon.	Dato			
			EVINSON	<u>_</u>	EXECUTIV	E DIREC	TOR				
			nt name and title	Droporor's signature	T .	Doto			DTIN		
Paid	d	Print/Type	preparer's name	Preparer's signature		Date		Check	if PTIN		
	parer							self-employ	ed		
	Only	Firm's nam	ne				Fir	m's EIN			
		Firm's add						one no.		,	
Ma	y the	IRS discu	ss this return with the preparer	shown above? See instr	uctions		<u> </u>		<u> </u>	Yes	X No
For	Pane	rwork Red	uction Act Notice, see the separat	e instructions						Form 9	90 (2023)

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	Check if Schedule C		ishments or note to any line in this Part III		х х
1	Briefly describe the organizat TO FOSTER NATIONAL		AL AMATEUR GOLF COMPETITION	N.	
			gram services during the year which		X No
3	Did the organization cease services?	conducting, or mak	ce significant changes in how it co		X No
4		program service acc and 501(c)(4) organ	omplishments for each of its three lizations are required to report the a ogram service reported.		
	(Code:) (Expens	es\$i	ncluding grants of \$	_) (Revenue \$)
4b	USA GOLF WILL FOSTE	R AND DEVELOP F	FUTURE OLYMPIANS IN THE SPO	_) (Revenue \$)
	ORGANIZATIONS WHOSE	CHARITABLE PUR	RC SECTION 501(C)(3) RPOSE IS TO TEACH, PROMOTE TO YOUTH ACROSS THE USA.	1	
4c	(Code:) (Expens	es \$i	ncluding grants of \$	_) (Revenue \$)
	Other program services (Des	· · · · · · · · · · · · · · · · · · ·			
	(Expenses \$ Total program service expens	including grants of \$ es 1.3) (Revenue \$ 3,820.)	

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Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		X
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		X
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	X	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
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		X
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	<u>, ,</u> ,		
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
4.0	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	4.		3.5
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	, ,		7.7
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	46		7.7
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	, ,		37
20 -	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		-
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	4		7.7
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

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Part IV Chocklist of Poquired Schodules (continued)

Par	Checklist of Required Schedules (continued)		V	Na
00	Did the approximation property areas then OF 000 of greater or other positions to an few democities individuals are		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		v
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the	22		X
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24.5	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23	Λ	
24 a	\$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	242		Х
h	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	240		
·	to defease any tax-exempt bonds?	24c		
Ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
_ 0 u	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
-	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L,			
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		_X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		_X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			3.7
27	related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		X
37	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		v
20	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	31		X
38	19? Note : All Form 990 filers are required to complete Schedule O	38	Х	
Part		1 00	77	<u> </u>
-CIIL	Check if Schedule O contains a response or note to any line in this Part V	_		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		

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Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a NONE			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
74	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	00		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	30		
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources			
-	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	4.4		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		v
	excess parachute payment(s) during the year?	15		X
16	If "Yes," see the instructions and file Form 4720, Schedule N.	16		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	10		21
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
••	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes." complete Form 6069.			

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Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			Х
Sect	tion A. Governing Body and Management		\ <u>'</u>	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	_		
h	committee, explain on Schedule O. Enter the number of voting members included on 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	1		
2		2	Х	
•	any other officer, director, trustee, or key employee?	<u> </u>		
3		3		X
	supervision of officers, directors, trustees, or key employees to a management company or other person?	4	X	21
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5	21	Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X
6	Did the organization have members or stockholders?			Δ.
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	7a		х
	one or more members of the governing body?	l'a		Λ
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7b		х
•	stockholders, or persons other than the governing body?	7.5		Λ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:	8a	Х	
_	The governing body?	8b	X	
b	Each committee with authority to act on behalf of the governing body?	00		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	_	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	15b		
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the states	with which a	conv of this F	orm 990 is	required to be filed	FL
1 <i>1</i>	LIST THE STATES	o vviti i vviiitii a	LUUV UI IIIIS I	01111 220 13	readired to be illed	

Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

X Upon request Another's website Other (explain on Schedule O)

19 Describe on 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.

State the name, address, and telephone number of the person who possesses the organization's books and records. 20 MEGAN ZEE 1 PGA TOUR BLVD PONTE VEDRA BEACH, FL 32082

Form **990** (2023)

904-285-3700 JSA

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

- 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

-	T .	Τ				•				
(A) Name and title	(B) Average	(do r	not c	Pos	C) sition	e than o	one	(D) Reportable	(E) Reportable	(F) Estimated amount
Name and the	hours	,				is both		compensation	compensation	of other
	per week	office	er an	d a c	lirect	tor/trust	tee)	from the	from related	compensation
	hours for divided the		organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations					
(1) ANDY PAZDER	1.00									
DIR/CO-CHAIR-THRU 12/11	NONE	X						76,537.	NONE	10,531.
(2) ANDY LEVINSON	1.00	Δ.						70,557.	NONE	10,551.
EXECUTIVE DIRECTOR	NONE			X				36,009.	NONE	4,074.
(3) YARED ALULA	1.00							307003.	1101112	170711
SECRETARY-THRU 12/11	NONE			X				5,731.	NONE	287.
(4) JASON GORE	1.00							-,	-	
DIRECTOR-FROM 12/12	NONE	Х						1,227.	NONE	26.
(5) VANESSA VOGLER	1.00									
SECRETARY-FROM 12/12	NONE			Х				218.	NONE	31.
(6) HEATHER DALY-DONOFRIO	1.00									
DIRECTOR/CO-CHAIR	NONE	Х						NONE	NONE	NONE
(7) JOHN BODENHAMER	1.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
(8) KERRY HAIGH	1.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
(9) CHARLEY HOFFMAN	1.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
(10) KRIS TAMULIS	1.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
(11)										
(12)										1
(13)										
(14)		-								<u> </u>

Form **990** (2023)

	F FEDERA	MOIT	Ι,	INC					45-	43196	43	-	0
Form 990 (2023) Part VII Section A. Officers, Directors, Ti	rustees, Ke	y Em	olgr	ve	es,	and F	Higi	hest Compensat	ed Employe	es (co	ontinue		Page 8
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles	Pos heck ss pe	erson	o th st na both ust the is or/tru Highest compensated	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation related organization (W-2/1099-M	n from ons	Esi am comp fro orga and	timated ount of other pensation the anization related nization	f on n d
1b Sub-total								119,722.	-	NONE		14.	949.
c Total from continuation sheets to Part VII,	Section A						•	NONE		NONE			NONE
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but no reportable compensation from the organization) 	t limited to t			d al		e) who				NONE		14,	949.
3 Did the organization list any former offi employee on line 1a? If "Yes," complete Schee	icer, directo	ch ind	ivid	uste ual	e,	key e	• •				3	Yes	No X
4 For any individual listed on line 1a, is the organization and related organizations g individual	reater than	\$15	0,0	00?) If	"Yes	5,"	complete Schedu	le J for su		4		X
5 Did any person listed on line 1a receive o for services rendered to the organization? If "	r accrue co	mpen	sati	on 1	fron	n any	un	related organization	on or individ		5	Х	
Section B. Independent Contractors													
 Complete this table for your five highest cor compensation from the organization. Report year. 													
(A) Name and business ac	ddress							(B) Description of se	rvices	Co	(C) ompens	ation	
							+						
							F						
							1						

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► NONE NONE

45-4319643

Form 990 (2023) USA Part VIII Statement of Revenue

1 (4)		Check if Schedule O contains a respon	se or note to an	y line in this Part V	/III		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts,	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1b					
وَق	С	Fundraising events 1c					
fts, ≅ A	d	Related organizations 1d					
ອັ≅	е	Government grants (contributions) 1e					
Sir	f	All other contributions, gifts, grants,					
e Ë		and similar amounts not included above . 1f	250,000.				
들	g	Noncash contributions included in					
ğğ		lines 1a-1f	5				
ಶ	h	Total. Add lines 1a-1f		250,000.			
			Business Code				
<u>8</u>	2a						
e e	b						
n S	С						
rar ev	d						
Program Service Revenue	е						
₫	f	All other program service revenue					
	g	Total. Add lines 2a-2f		NONE			
	3	Investment income (including dividends,	interest, and				
		other similar amounts)		NONE			
	4	Income from investment of tax-exempt bond	•	NONE			
	5	Royalties		25,000.			25,000.
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b	NONE				
	C	Rental income or (loss) 6c NONE		NONE			
	d 7a	Net rental income or (loss)	(ii) Other	NONE			
	l 'a	sales of assets	() 06.				
		other than inventory 7a					
Ф	b	Less: cost or other basis					
evenue	"	and sales expenses 7b					
eve	С	Gain or (loss) 7c					
	d	Net gain or (loss)		NONE			
Other R	8a	Gross income from fundraising					
ō	""	events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a	NONE				
	b	Less: direct expenses 8b	NONE				
	С	Net income or (loss) from fundraising events		NONE			
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	NONE				
	b	Less: direct expenses 9b	NONE				
	С	Net income or (loss) from gaming activities.		NONE			
	10a	Gross sales of inventory, less					
		returns and allowances 10a	NONE				
	b	Less: cost of goods sold 10b	NONE				
	С	Net income or (loss) from sales of inventory.		NONE			
Snc		MICCELL MECHIC PROPERTY	Business Code				
Miscellaneous Revenue	11a	MISCELLANEOUS REVENUE					
el a	b						
Sce	C	All other revenue					
Ξ	d e	All other revenue		NONE			
	<u>е</u> 12	Total revenue. See instructions		275,000.			25,000.

Form **990** (2023)

JSA 3E1051 2.000 3297DS 637A

45-4319643

Part IX Statement of Functional Expenses

		t complete all column		

	Check if Schedule O contains a response or note to any line in this Part IX										
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to domestic organizations		•								
	and domestic governments. See Part IV, line 21	NONE									
2	Grants and other assistance to domestic										
	individuals. See Part IV, line 22	NONE									
3	Grants and other assistance to foreign										
	organizations, foreign governments, and										
	foreign individuals. See Part IV, lines 15 and 16	NONE									
4	Benefits paid to or for members	NONE									
5	Compensation of current officers, directors,										
	trustees, and key employees	NONE									
6	Compensation not included above to disqualified										
	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)	NONE									
7	Other salaries and wages	NONE									
8	Pension plan accruals and contributions (include	NONE									
	section 401(k) and 403(b) employer contributions)										
9	Other employee benefits	NONE									
10	Payroll taxes	NONE									
	Fees for services (nonemployees):										
а	Management	NONE									
	Legal	63.		63.							
	Accounting	9,000.		9,000.							
	Lobbying	NONE									
	Professional fundraising services. See Part IV, line 17.	NONE									
	Investment management fees	NONE									
g	Other. (If line 11g amount exceeds 10% of line 25, column	MONTE									
40	(A), amount, list line 11g expenses on Schedule O.)	NONE NONE									
	Advertising and promotion	NONE									
13	Office expenses	NONE									
14	Information technology	NONE									
15 16	Royalties	NONE									
17	Occupancy	6,635.	6,635.								
	Travel Payments of travel or entertainment expenses	0,033.	0,033.								
10	for any federal, state, or local public officials	NONE									
19	Conferences, conventions, and meetings	NONE									
	Interest	NONE									
21		NONE									
	Depreciation, depletion, and amortization	NONE									
	Insurance	15,537.		15,537.							
24											
	above. (List miscellaneous expenses on line 24e. If										
	line 24e amount exceeds 10% of line 25, column										
	(A), amount, list line 24e expenses on Schedule O.)										
а	PAN AM GAMES EXPENSES	7,185.	7,185.								
b	DUES AND FEES	4,274.		4,274.							
С											
d											
е	All other expenses										
	Total functional expenses. Add lines 1 through 24e	42,694.	13,820.	28,874.	NONE						
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)										

Form **990** (2023)

Form 990 (2023)

Page **11**

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	art X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	707,781.	1	860,127.
	2	Savings and temporary cash investments	NONE	2	NONE
	3	Pledges and grants receivable, net	NONE	3	NONE
	4	Accounts receivable, net	NONE	4	NONE
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	NONE	5	NONE
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	NONE	6	NONE
ţ	7	Notes and loans receivable, net	NONE	7	NONE
Assets	8	Inventories for sale or use	NONE	8	NONE
As	9	Prepaid expenses and deferred charges . SEE SCHEDULE .Q	2,163.	9	95,431.
	_	Land, buildings, and equipment: cost or other	_,,		70,102
		basis. Complete Part VI of Schedule D 10a			
	h	Less: accumulated depreciation 10b	NONE	100	
	11	Investments - publicly traded securities	NONE		NONE
	12	Investments - other securities. See Part IV, line 11	NONE		NONE
	13	· · · · · · · · · · · · · · · · · · ·	NONE		NONE
	14	Investments - program-related. See Part IV, line 11	NONE		-
		Intangible assets			NONE
	15	Other assets. See Part IV, line 11	3,719.	15	3,655.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	713,663.	16	959,213.
	17	Accounts payable and accrued expenses	12,708.	17	25,952.
	18	Grants payable	NONE		NONE
	19	Deferred revenue	NONE		NONE
	20	Tax-exempt bond liabilities	NONE		NONE
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	NONE	21	NONE
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
jab		controlled entity or family member of any of these persons	NONE		NONE
_	23	Secured mortgages and notes payable to unrelated third parties	NONE	23	NONE
	24	Unsecured notes and loans payable to unrelated third parties	NONE	24	NONE
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	NONE	25	NONE
	26	Total liabilities. Add lines 17 through 25	12,708.	26	25,952.
seo		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
lar	27	Net assets without donor restrictions	700,955.	27	933,261.
B	28	Net assets with donor restrictions.	NONE		NONE
Fund Balances		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
Assets or	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds		31	
Ť	32	Total net assets or fund balances	700,955.	32	933,261.
Net	33	Total liabilities and net assets/fund balances	713,663.	33	959,213.
	100	Total habilities and not assets/faina balances, , , , , , , , , , , , , , , , , , ,	/13,003.	33	Form 990 (2023)

Form **990** (2023)

Form 990 (2023) Page **12**

i Oiiii 30	(2023)				age -
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		275,	<u>, 000</u> .
2	Total expenses (must equal Part IX, column (A), line 25)	2		42,	<u>694</u> .
3	Revenue less expenses. Subtract line 2 from line 1	3		232,	<u> 306</u> .
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		700,	<u>, 955</u> .
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		933,	<u>. 261</u> .
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
			_	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	cplain c	วท		
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled	or		
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2	b X	
	If "Yes," check a box below to indicate whether the financial statements for the year were aud				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersight	of		
	the audit, review, or compilation of its financial statements and selection of an independent accounts	ınt?	2	c X	
	If the organization changed either its oversight process or selection process during the tax year, e	xplain o	on		
	Schedule O.	•			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in th	ne		
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			а	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	udits .	3	b	

SCHEDULE A (Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

USA GOLF FEDERATION, INC 45-4319643 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(y). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 331/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 x An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. X Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Typ functionally integrated, or Type III non-functionally integrated supporting organization. 4 Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (v) Amount of monetary (iv) Is the organization (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see instructions) above (see instructions)) document? instructions) SEE SUPPLEMENTAL PAGE Yes No (A) (B) (C) (D) (E) Total

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

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023 Page 2

Ocne	1 die 7 (1 dim 550) 2025						r age 🖴
Par	(Complete only if you checke	d the box on	line 5, 7, or 8	of Part I or if t	he organizatio	n failed to qua	
C	Part III. If the organization fail	s to quality ui	nder the tests	iistea below, p	nease comple	ie Part III.)	
	tion A. Public Support	(=) 2010	(h) 2020	(=) 2024	(4) 2022	(=) 2022	(f) Total
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support		T	I	I	I	T
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	
13	First 5 years. If the Form 990 is for organization, check this box and stop here	<u> </u>					
	tion C. Computation of Public Sup		_			<u> </u>	
14	Public support percentage for 2023 (li					14	<u>%</u>
15	Public support percentage from 2022						%
гьа	331/3% support test - 2023. If the organization of						
h	box and stop here. The organization q 331/3% support test - 2022. If the org	-		-			
IJ	this box and stop here. The organization						
17a	10%-facts-and-circumstances test - 2 10% or more, and if the organization Part VI how the organization meets organization	2023. If the orgon meets the father facts-and-control of the facts-and-	ganization did nacts-and-circums	ot check a box tances test, che est. The organia	on line 13, 16a eck this box ar zation qualifies	a, or 16b, and nd stop here. I as a publicly s	line 14 is Explain in supported
b	10%-facts-and-circumstances test - 2 15 is 10% or more, and if the organiz in Part VI how the organization meets	2022. If the organization meets the facts-and	ganization did r ne facts-and-ciro I-circumstances	not check a box cumstances test test. The organ	on line 13, 16, check this boxization qualifies	a, 16b, or 17a c and stop her c as a publicly s	, and line e. Explain supported
18	organization						

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023 Page **3**

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

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

Sec	tion A. Public Support			· · ·	•	,	
Cale	endar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
. a	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support		•				
Cale	endar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties, and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for	the organizati	on's first, secon	d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
	organization, check this box and stop here.	<u> </u>	<u></u> .		<u></u> .	<u> </u>	
Sec	tion C. Computation of Public Supp						
15	Public support percentage for 2023 (line 8,	column (f), divid	led by line 13, colu	mn (f))		15	%
16	Public support percentage from 2022 Scheo					16	%
Sec	tion D. Computation of Investment	Income Per	centage				
17	Investment income percentage for 2023 (lin	e 10c, column ((f), divided by line	13, column (f))		17	%
18	Investment income percentage from 2022 S	Schedule A, Part	III, line 17			18	%
19 a	331/3% support tests - 2023. If the org					ore than 331/3 %,	and line
	17 is not more than 331/3%, check this	box and stop	here. The organ	nization qualifies	as a publicly so	upported organiza	tion
b	331/3% support tests - 2022. If the orga	nization did not	t check a box on	line 14 or line 1	9a, and line 16	is more than 331	1/3 %, and
	line 18 is not more than 331/3 %, check	this box and s	top here. The or	ganization qualifie	es as a publicly	supported organi	zation
20	Private foundation. If the organization d	id not check	a box on line 1	4, 19a, or 19b,	check this bo	x and see instru	ctions

JSA 3E1221 1.000 Schedule A (Form 990) 2023 Page 4

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
g by			
	1	X	
is ed			
	2	X	
ər	3a	Х	
d e			
	3b	X	
3)			
	3с	X	
If			
	4a		_X_
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or Sy			
	7		X
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h			
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it	9с		Х
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to	10b		_
dul		rm aar)) 2023

Schedule A (Form 990) 2023 Page **5**

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
L	11c below, the governing body of a supported organization?	11a		_X_
b C	A family member of a person described on line 11a above? A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,	11b		_X_
·	provide detail in Part VI.	11c		X
Secti	on B. Type I Supporting Organizations			
	, , , , , , , , , , , , , , , , , , , ,		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	X	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		X
Secti	on C. Type II Supporting Organizations		10	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Yes	No
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.			
Socti	on E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructi	ons)	
a	The organization satisfied the Activities Test. Complete line 2 below.	duou	0110).	
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	e instr	uction	s).
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If</i> "Yes" or "No," provide details in Part VI .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Ves" describe in Part VI the role played by the organization in this regard	つん	1	i

Page 6 Schedule A (Form 990) 2023

Pa	art V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nizations	S	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin instructions. All other Type III non-functionally integrated supporting organic			
Se	ection A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
_7		7		
_8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Se	ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
_	Total (add lines 1a, 1b, and 1c)	1d		
е	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Se	ection C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional (see instructions).	lly integra	ted Type III supporting	g organization

Schedule A (Form 990) 2023

3297DS 637A

Schedule A (Form 990) 2023 Page 7 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations	3	
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - p		5		
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	onsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	Section E - Distribution Allocations (see instructions) (i) Excess Distributions (ii) Underdistripre-20			ıs	(iii) Distributable Amount for 2023
_1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
_3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
C	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from				
	Section D, line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				

Schedule A (Form 990) 2023

Breakdown of line 7: Excess from 2019 Excess from 2020 Excess from 2021 d Excess from 2022 Excess from 2023

Page 8

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

SCHEDULE A, PART IV, SECTION A, QUESTION 2

EACH ORGANIZATION MEETS THE PUBLIC SUPPORT TEST UNDER 509(A)(1) OR 509(A)(2) AS DESCRIBED BASED ON AVAILABLE INFORMATION.

SCHEDULE A, PART IV, SECTION A, QUESTION 3B

EACH ORGANIZATION MEETS THE PUBLIC SUPPORT TEST UNDER 509(A)(1) OR 509(A)(2) AS DESCRIBED BASED ON AVAILABLE INFORMATION.

SCHEDULE A, PART IV, SECTION A, QUESTION 3(C)

NO MONETARY SUPPORT WAS PROVIDED TO THE SUPPORTED ORGANIZATIONS.

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

			`								
SCHEDULE A, PART I - INFORMATION ABOUT SUPPORTED ORGANIZATIONS											
	(III) TYPE OF	(IV)	(V) AMOUNT OF	(VI) AMOUNT OF							
(I) NAME OF SUPPORTED ORGANIZATION		ORGANIZATION	YES NO	SUPPORT	OTHER SUPPORT						
PGA TOUR, INC.	52-0999206	10	X	NONE	NONE						
LADIES PROFESSIONAL GOLF ASSOCIATION, INC.	75-0055465	10	X	NONE	NONE						
U.S. GOLF ASSOCIATION	13-1427105	7	X	NONE	NONE						
THE PROFESSIONAL GOLFERS ASSOCIATION OF AMERICA	59-0785835	10	X	NONE	NONE						
TOTAL AMOUNT OF SUPPORT				NONE	NONE						
				==========	==========						

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

Inspection

Schedule C (Form 990) 2023

	Section 527 organizations: Comp	•			
	•	on Form 990, Part IV, line 4, or Form	, ,	, , ,	
	, , , , ,	that have filed Form 5768 (election un	, ,,	•	•
	. , . ,	that have NOT filed Form 5768 (election Form 990, Part IV, line 5 (Proxy	` '	'	•
	(see separate instructions), then		Tax) (See Separate III	istructions, or 1 orni 330-	LZ, Tait V, line 330 (Flox
•	Section 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Nam	e of organization			Employer ide	ntification number
USA	GOLF FEDERATION, IN	NC.		45-4	319643
Par	t I-A Complete if the o	organization is exempt under	section 501(c) or i	is a section 527 orga	nization.
1	Provide a description of the	ne organization's direct and indi	rect political camp	aign activities in Part	IV. See instructions fo
	definition of "political campa	aign activities."			
2	Political campaign activity ex	xpenditures. See instructions		\$	
3	Volunteer hours for political	campaign activities. See instructio	ns		
Par		organization is exempt under s			
1	Enter the amount of any exc	cise tax incurred by the organizatio	n under section 495	5 \$	
2		cise tax incurred by organization m			
3		a section 4955 tax, did it file Form			
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Par	t I-C Complete if the o	organization is exempt under	section 501(c), ex	cept section 501(c)(3	3).
1		xpended by the filing organization			
_					
2	527 exempt function activities	g organization's funds contributed		\$	
3	line 17b	enditures. Add lines 1 and 2. Ent		\$	
4		e Form 1120-POL for this year?			
5		and employer identification numb			
		s. For each organization listed, en			
		ributions received that were prom nd or a political action committee (l			
		· · · · · · · · · · · · · · · · · · ·	· ·	1	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate
					political organization.
					If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Sch	edule C (Form 990) 2023	JSA GO.	LF FEDER	ATION, INC.		45	-4319643 Page 4					
Pa	Complete if the org section 501(h)).	anizatio	on is exen	npt under section	501(c)(3) and	filed Form 5768 (ele	ction under					
A	Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address EIN, expenses, and share of excess lobbying expenditures).											
В	Check if the filing organiz	ation che	ecked box A	and "limited contro	l" provisions app	oly.						
	Limits (The term "expendit		ying Expendence)	(a) Filing organization's totals	(b) Affiliated group totals					
b d d	Total lobbying expenditures to in Total lobbying expenditures to in Total lobbying expenditures (ad I Other exempt purpose expendite Total exempt purpose expendite Lobbying nontaxable amount.	nfluence d lines 1a ures ures (ado	a legislative a and 1b) I lines 1c an	e body (direct lobbyii	ng)							
	If the amount on line 1e, column (a	\ or (b) io:	The lebbyin	a nantavahla amaunt i								
	not over \$500,000.) Or (b) is:		amount on line 1e.	s:							
	over \$500,000 but not over \$1,000	000		us 15% of the excess	over \$500,000							
	over \$1,000,000 but not over \$1,500			us 10% of the excess								
	over \$1,500,000 but not over \$1,50			us 5% of the excess o								
	over \$17,000,000 but not over \$17,0	\$1,000,000		ver \$1,500,000.								
_	Grassroots nontaxable amount	(enter 25										
_	Subtract line 1g from line 1a. If	•	,		-							
	Subtract line 1f from line 1c. If z				<u>-</u>							
	If there is an amount other th					tion file Form 4720						
,	reporting section 4911 tax for the				_		Yes No					
	Toporting section 4511 taxter ii			aging Period Under			100 110					
	(Some organizations that						nns below.					
	(come or g			e instructions for li								
		Lobb	ying Exper	nditures During 4-Ye	ear Averaging Pe	riod	1					
	Calendar year (or fiscal year beginning in)	(a)	2020	(b) 2021	(c) 2022	(d) 2023	(e) Total					
2a	Lobbying nontaxable amount											
b	Lobbying ceiling amount (150% of line 2a, column (e))											
С	: Total lobbying expenditures											
d	Grassroots nontaxable amount											
е	Grassroots ceiling amount											

Schedule C (Form 990) 2023

f Grassroots lobbying expenditures

Schedule C (Form 990) 2023	USA	GOLF F	FEDERATION,	INC.				45-4319643	Р
Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).									
For each "Yes," response o	n lines	1a throu		provide in Pa	rt IV a	detailed	(a)	(b)	

	(election under section 501(h)).						
=or	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)		
	cription of the lobbying activity.	Yes	No		Amou	nt	
a b c d e f	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?. Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?						
g h	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i j 2a b c	Other activities? Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to not be 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?						
	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5),	or s	ection			
1 2 3 Pa	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 501 (c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No"	m the (c)(5),	prior or s	ection	1 2 3	Yes , is	No
	answered "Yes."					-	
1 2	Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	unts d	of	1			
a b c 3	Current year	es	e	2a 2b 2c 3			
5	and political expenditures next year?		Ĭ	5			
ro	Supplemental Information vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate see instructions); and Part II-B, line 1. Also, complete this part for any additional information.	d grou	p list); Part I	II-A, lin	es 1	and

Schedule C (Form 990) 2023

SCHEDULE D (Form 990)

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.

Department of the Treasury Internal Revenue Service Name of the organization

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

2023	
Open to Public Inspection	

OMB No. 1545-0047

TICN	GOLF FEDERATION, INC.	45-4319643
	organizations Maintaining Donor Advised Funds or Other Similar Funds or	
Га	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	Accounts
		(h) Funda and ather assesses
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year) .	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held	
	funds are the organization's property, subject to the organization's exclusive legal control?	Yes 📖 No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fu	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for all	ny other purpose
	conferring impermissible private benefit?	Yes No
Pa	rt II Conservation Easements	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (for example, recreation or education) Preservation of land for public use (for example, recreation or education)	of a historically important land area
	Protection of natural habitat Preservation of	of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	the form of a conservation
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included on line 2a	2c
d	Number of conservation easements included on line 2c acquired after July 25, 2006, and	
	not on a historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or termi	nated by the organization during the
-	tax year	g
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspecti	
	violations, and enforcement of the conservation easements it holds?	-
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing	
•	g,g,g	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing co	onservation easements during the year
		g ,
8	Does each conservation easement reported on line 2d above satisfy the requirements of sect	tion 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and	d expense statement and balance
	sheet, and include, if applicable, the text of the footnote to the organization's financial statem	
	organization's accounting for conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue	e statement and balance sheet works
	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue of art, historical treasures, or other similar assets held for public exhibition, education, and the similar assets held for public exhibition, education, the similar assets held for public exhibition, education, and the similar assets held for public exhibition, education, and the similar assets held for public exhibition, education, and the similar assets held for public exhibition, education, and the similar assets held for public exhibition, education, and the similar assets held for public exhibition, education, and the similar assets held for public exhibition, education, and the similar assets held for public exhibition, education, and the similar assets held for public exhibition, education, and the similar assets held for public exhibition, education, and the similar assets held for public exhibition, education, and the similar assets held for public exhibition.	or research in furtherance of public
	service, provide in Part XIII the text of the footnote to its financial statements that describes the	
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue st art, historical treasures, or other similar assets held for public exhibition, education, or rese	
	provide the following amounts relating to these items:	earch in furtherance of public service,
	(i) Revenue included on Form 990, Part VIII, line 1	\$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar a	
-	following amounts required to be reported under FASB ASC 958 relating to these items:	access for interioral gain, provide the
а	Revenue included on Form 990, Part VIII, line 1	\$
	Assets included in Form 990, Part X	\$
<u> </u>		

Schedule D (Form 990) 2023

		GOLF FEDERA				041		431964	
	organizations Maintain							`	
3	Using the organization's acquisition		dother recor	ds, check	any of th	e follow	ing that make sig	gnificant u	ise of its
	collection items (check all that app	oly).		-					
а	Public exhibition		d L	=	r exchang				
b	Scholarly research		e	_ Other __					
С	Preservation for future gene								
4	Provide a description of the orga	nization's collectio	ns and expla	ain how tl	hey furthe	r the org	ganization's exem	pt purpos	e in Part
	XIII.								
5	During the year, did the organization								
	assets to be sold to raise funds rat		ntained as pa	art of the o	rganizatio	n's collec	tion?	Yes	No
Pa	rt IV Escrow and Custodial A							_	
	Complete if the organiza	ation answered "	Yes" on For	m 990, P	art IV, lin	e 9, or re	eported an amou	unt on Fo	rm
	990, Part X, line 21.								
1a	Is the organization an agent, trus								
	included on Form 990, Part X?							Yes	No
b	If "Yes," explain the arrangement	in Part XIII and cor	mplete the fo	llowing tab	le.				
							Amour	nt	
С	Beginning balance				10	;			
d	Additions during the year				10	I			
е	Distributions during the year				1e				
f	Ending balance				1f				
2a	Did the organization include an an	nount on Form 990), Part X, line	21, for e	scrow or c	ustodial	account liability?	Yes	No
b	If "Yes," explain the arrangement	in Part XIII. Check	here if the e	xplanation	has been	provided	in Part XIII		
Pa	rt V Endowment Funds								
	Complete if the organize	ation answered "`	Yes" on For	m 990, P	art IV, lin	e 10.			
		(a) Current year	(b) Pric	or year	(c) Two ye	ars back	(d) Three years back	(e) Four	years back
1a	Beginning of year balance								
b	Contributions								
c	Net investment earnings, gains,								
·	and losses								
d	Grants or scholarships								
e	Other expenditures for facilities								
·	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage		r end halanc	a (lina 1a	column (a)) hald as			
a	Board designated or quasi-endowr		%	e (iiile 19,	coluitiii (a)) Held as	•		
b	Permanent endowment	%	-						
С	Term endowment %)							
	The percentages on lines 2a, 2b,	and 2c should equa	al 100%.						
3a	Are there endowment funds not in	•		ation that a	are held a	nd admin	istered for the		
	organization by:							[Yes No
	(i) Unrelated organizations?							3a(i)	
	(ii) Related organizations?							3a(ii)	
b	If "Yes" on line 3a(ii), are the relat							3b	
4	Describe in Part XIII the intended	· ·	•						
_	# VI Land, Buildings, and Eq	uipment							
	Complete if the organize	ation answered "		rm 990, F	Part IV, lin	e 11a. S	See Form 990, P	art X, lin	e 10.
	Description of property		or other basis restment)		or other basis		cumulated eciation	(d) Book va	lue
1a	Land	,	comont)	(01		depit	GGIGHOTT		
b	Buildings								
0	Leasehold improvements								
d	Equipment.								
e Tota	Other I. Add lines 1a through 1e. (Columi		orm QQA Dorf	X line 10	c column	(B))			
· Ota	,	i (u) musi eyual FC	nin Jau, Fall	A, IIIIC 10	o, colullii i	<i>-)//</i>			

Schedule D (Form 990) 2023

Part VII	Investments - Other Securities Complete if the organization answered	"Voc" on Form 000	Dart IV line 11h See Form 000	Part V line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mark	
	al derivatives			
	held equity interests			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)	(h) month a world Farm 2000 Part V (fine 40 and 70)			
	n (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments - Program Related Complete if the organization answered	"Vos" on Form 990	Part IV line 11c See Form 900	Part Y line 13
	(a) Description of investment	(b) Book value	(c) Method of valua Cost or end-of-year mark	
(4)				
(1)				
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets			
	Complete if the organization answered	"Yes" on Form 990), Part IV, line 11d. See Form 990	, Part X, line 15.
		scription		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	umn (b) must equal Form 990, Part X, line 15, c	ol. (B))		
Part X	Other Liabilities	W	S	000 D ()/
	Complete if the organization answered	"Yes" on Form 990), Part IV, line 11e or 11f. See For	m 990, Part X,
	line 25.			I
1.		tion of liability		(b) Book value
	ral income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	to the second second forms 000 Part V Branch Co. 1 (D)			
i otai. (Colun	nn (b) must equal Form 990, Part X, line 25, col. (B))			

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII . | X JSA 3E1270 1.000

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Schedule D (Form 990) 2023

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n	
1	Total revenue, gains, and other support per audited financial statements	1	409,671.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	134,671.
3	Subtract line 2e from line 1	3	275,000.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	275,000.
Part	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	177,365.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	-	
b	Prior year adjustments	-	
C	Other losses	-	
d	Other (Describe in Part XIII.)	20	124 671
e	Add lines 2a through 2d	2e 3	134,671. 42,694.
3	Subtract line 2e from line 1		42,094.
4	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
a b	Other (Describe in Part XIII.)	1	
C	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	42,694.
Part	XIII Supplemental Information		
2; Part	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; F XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
SEE	SUPPLEMENTAL PAGE		

SCHEDULE D, PART X LINE 2

USA GOLF FEDERATION, INC. IS A NOT-FOR-PROFIT CORPORATION EXEMPT FROM

FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE

AND FROM STATE TAXES UNDER SIMILAR PROVISIONS OF THE FLORIDA STATUTES.

ACCORDINGLY, NO PROVISION FOR FEDERAL OR STATE INCOME TAXES HAS BEEN

RECORDED IN THE ACCOMPANYING FINANCIAL STATEMENTS. USA GOLF FEDERATION,

INC. FILES THE REQUIRED ANNUAL FEDERAL INFORMATIONAL RETURN FOR

TAX-EXEMPT ORGANIZATIONS.

USA GOLF FEDERATION, INC. 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. USA GOLF FEDERATION, INC. HAS NOT RECOGNIZED A LIABILITY FOR

UNCERTAIN TAX POSITIONS. IF THERE WERE AN UNRECOGNIZED TAX BENEFIT, USA

GOLF FEDERATION, INC. WOULD RECOGNIZE INTEREST ACCRUED RELATED TO THE

UNRECOGNIZED TAX BENEFITS IN INTEREST EXPENSE AND PENALTIES IN OPERATING

EXPENSES.

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number USA GOLF FEDERATION, INC. 45-4319643

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or réimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
_	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
•				
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
	<u> </u>			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
_	organization or a related organization: Receive a severance payment or change-of-control payment?	4a		v
a	Participate in or receive payment from a supplemental nonqualified retirement plan?	4a 4b		X
b	Participate in or receive payment from an equity-based compensation arrangement?	46 4c		X
С	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	40		
	if tes to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
3				
_	compensation contingent on the revenues of:	E 0		v
a	The organization?	5a		X
b	Any related organization?	5b		X
6				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
_	compensation contingent on the net earnings of:	6-		v
a	The organization?	6a		X
D	Any related organization?	6b		X
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed	7		v
0	payments not described on lines 5 and 6? If "Yes," describe in Part III	-		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			3.7
•	in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2023

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(-)(/) (//)			ind/or 1099-MISC and/or		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
ANDY LEVINSON	(i)	20,350.	13,213.	2,446.	3,588.	486.	40,083.	NONE
1 EXECUTIVE DIRECTOR	(ii)							
ANDY PAZDER	(i)	5,631.	47,759.	23,147.	10,077.	454.	87,068.	NONE
2 DIR/CO-CHAIR-THRU 12/11	(ii)							
YARED ALULA	(i)	3,578.	1,720.	433.	NONE	287.	6,018.	NONE
3 SECRETARY-THRU 12/11	(ii)							
JASON GORE	(i)	522.	514.	191.	NONE	26.	1,253.	NONE
4 DIRECTOR-FROM 12/12	(ii)							
VANESSA VOGLER	(i)	166.	51.	1.	NONE	31.	249.	NONE
5 SECRETARY-FROM 12/12	(ii)							
	(i)							
6	(ii)							
	(i)							
	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Part | Supplemental Information

Schedule J (Form 990) 2023

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

FORM 990, PART VII, LINE 5

USA GOLF FEDERATION, INC. DOES NOT COMPENSATE ANY OF THE OFFICERS OR

DIRECTORS REPORTED ON PART VII OF FORM 990. THE FIVE INDIVIDUALS LISTED

BELOW AND REPORTED ON FORM 990, PART VII, VOLUNTEER THEIR TIME TO THE

FEDERATION. THEIR 2023 COMPENSATION WAS PAID BY PGA TOUR, INC., AN

UNRELATED ORGANIZATION THAT, IN TURN, DONATES THOSE PROFESSIONAL SERVICES

TO USA GOLF FEDERATION.

ANDY LEVINSON

(B)	BASE COMPENSATION	20,350
(C)	BONUS & OTHER COMPENSATION	15,659
(D)	RETIREMENT	3,588
(E)	NONTAXABLE BENEFITS	486
(A)	NAME	ANDY PAZDER
(B)	BASE COMPENSATION	5,631
(C)	BONUS & OTHER COMPENSATION	70,906

Page 3

(A) NAME

Part III Supplemental Information

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

(D) RETIREMENT	10	.077
·ν	/ 1/11/11/11/11/11/11/11/11/11/11/11/11/	10	. 0 / /

(E) NONTAXABLE BENEFITS 454

(A) NAME YARED ALULA

(B) BASE COMPENSATION 3,578

(C) BONUS & OTHER COMPENSATION 2,153

(D) RETIREMENT NONE

(E) NONTAXABLE BENEFITS 287

(A) NAME JASON GORE

(B) BASE COMPENSATION 522

(C) BONUS & OTHER COMPENSATION 705

(D) RETIREMENT NONE

(E) NONTAXABLE BENEFITS 26

(A) NAME VANESSA VOGLER

(B) BASE COMPENSATION 166

(C) BONUS & OTHER COMPENSATION 52

Part III Supplemental Information

Schedule J (Form 990) 2023

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

(D) RETIREMENT NONE

(E) NONTAXABLE BENEFITS 31

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

2023
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number 45-4319643

USA GOLF FEDERATION, INC.

PART IV, LINE 4

ALTHOUGH THE FILING ORGANIZATION CONTINUED TO MEET THE SECTION 509(A)(1)

PUBLIC SUPPORT TEST DURING 2023, THE FILING ORGANIZATION'S BOARD OF

DIRECTORS AUTHORIZED A CHANGE TO THE ARTICLES OF INCORPORATION DURING

2023 TO QUALIFY THE FILING ORGANIZATION AS A TYPE I SUPPORTING

ORGANIZATION IN ORDER TO BETTER CARRY OUT THE FILING ORGANIZATION'S

TAX-EXEMPT PURPOSE OF FOSTERING NATIONAL OR INTERNATIONAL AMATEUR SPORTS

COMPETITIONS WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL

REVENUE CODE. ACCORDINGLY, THE FILING ORGANIZATION HAS COMPLETED SCHEDULE

A DISCLOSING ITS SUPPORTED ORGANIZATIONS AND ITS QUALIFICATION TO BE

CLASSIFIED AS A TYPE I SUPPORTING ORGANIZATION.

PART VI, LINE 11B

USA GOLF FEDERATION, INC.'S FORM 990 WAS REVIEWED BY USA GOLF
FEDERATION'S EXECUTIVE DIRECTOR. ADDITIONALLY, A COPY OF FORM 990 WAS
PROVIDED TO ALL BOARD MEMBERS PRIOR TO THE FILING OF THE FORM WITH THE
INTERNAL REVENUE SERVICE.

PART VI, LINE 12 A, B, C

USA GOLF FEDERATION, INC. MAINTAINS A CONFLICT OF INTEREST POLICY FOR THE MEMBERS OF THE BOARD OF DIRECTORS. EACH MEMBER OF THE BOARD IS ANNUALLY REQUIRED TO PROVIDE THE COMPANY A STATEMENT CONFIRMING THEY RECEIVED A COPY OF THE POLICY, AND AGREED TO COMPLY WITH THE POLICY. EACH MEMBER IS REQUIRED ANNUALLY TO DISCLOSE ANY RELATIONSHIP, TRANSACTION, OR POSITION THEY HOLD THAT COULD GIVE RISE TO A CONFLICT AND TO NOTIFY THE ORGANIZATION IF SUCH A RELATIONSHIP EXISTS AT ANY TIME DURING THE YEAR. YEAR.

45-4319643

Employer identification number

FORM 990, PART III - PROGRAM SERVICE

LINE 4A, PROGRAM SERVICE

USA GOLF HAS BEEN SELECTED BY INTERNATIONAL GOLF FEDERATION ("IGF") AND THE UNITED STATES OLYMPIC COMMITTEE ("USOC") AS THE UNITED STATES NATIONAL GOVERNING BODY ("NGB") FOR THE SPORT OF GOLF IN THE UNITED STATES. USA GOLF, AS THE NGB, WILL FOSTER NATIONAL OR INTERNATIONAL AMATEUR GOLF COMPETITION BY SELECTING AND SUPPORTING TEAM USA TO REPRESENT THE UNITED STATES OF AMERICA IN THE OLYMPICS, PAN AMERICAN AND/OR PARALYMPIC GAMES; AND TO FULFILL ALL OTHER PURPOSES FOR A NGB AS SPECIFIED BY THE UNITED STATES OLYMPIC COMMITTEE AND THE TED STEVENS OLYMPIC AND AMATEUR SPORTS ACT OF 1978, 36 U.S.C. SEC 2205601 ET. SEQ. THE SELECTION CRITERIA FOR BOTH WOMEN'S AND MEN'S TEAM USA WILL BE DEVELOPED BY USA GOLF AND IT WILL COMPLY WITH THE RULES HANDED DOWN BY THE IGF AND THE INTERNATIONAL OLYMPIC COMMITTEE ("IOC"). ONCE TEAM USA IS SELECTED, USA GOLF WILL PROVIDE VARIOUS SERVICES TO TEAM USA. SUCH SERVICES WILL INCLUDE PREPARING THE TEAM MEMBERS FOR PARTICIPATION IN THE OLYMPIC GAMES BY INFORMING AND ENFORCING USOC'S GUIDELINES FOR ATHLETES; ASSISTING THE TEAM WITH SCHEDULES AND TRAVEL ARRANGEMENTS; AND PROVIDING THE TEAM WITH UNIFORMS, TRAVEL TO AND FROM THE OLYMPIC GAMES.

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