



2025 Golf Industry Compensation and Benefits Study “Corporate/Headquarters/Management Company” Survey

Three Ways to Reply:

| | | |
|--|---|---|
| <p>1. Complete Online ngcoa.org/compensation</p> | <p>2. Scan and Email Scan and send an electronic file to Jodi Reilly at jreilly@ngf.org</p> | <p>3. Complete Excel File Go to ngcoa.org/compensation to download an Excel file that can be used to report on multiple facilities.</p> |
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If you have questions regarding this survey form, please contact Jodi Reilly at National Golf Foundation, 561-354-1640 or jreilly@ngf.org.

Contact Information

| | | |
|---------------|--------|------|
| Company Name: | | |
| City: | State: | Zip: |
| Contact: | Title: | |
| Phone: | Email: | |

Corporate Profile Information

1. Total number of golf courses: _____
2. Gross revenue of the company: \$ _____
3. Total number of employees: _____ Full-time _____ Part-time
4. Which best describes your company? Multi-course operator (MCO) Resort

Compensation Information

Please report the number of employees and compensation information for **FULL-TIME EQUIVALENT** employees based on rates in effect January 1, 2025. Commission and bonus figures should be based on the 12-month period ending December 31, 2024, or your most recently completed fiscal year. All figures should be reported on an annual basis. If a particular employee is hourly, please convert their hourly rate to an annual salary by multiplying the hourly rate x 2000. If more than one employee exists for a particular job title, please report average figures. **REPORT ALL FIGURES IN U.S. DOLLARS.**

If an employee oversees multiple functions, please report their compensation under the position that matches their job title. For example, a general manager, who also has sales responsibilities at a course with no separate sales manager, should answer only for the general manager position and not additionally for the sales manager position.

Corporate Level Compensation (this section only needs to be completed once per company)

| | Number of Employees | Average Base Salary Per Person | Average Annual Bonus Per Person | Average Annual Commission Per Person |
|-------------------------------------|---------------------|--------------------------------|---------------------------------|--------------------------------------|
| Chief/Top Staff Executive | | \$ | \$ | \$ |
| Chief/Top Operations Executive | | \$ | \$ | \$ |
| Chief/Top Financial Executive | | \$ | \$ | \$ |
| Chief/Top Human Resources Executive | | \$ | \$ | \$ |
| Chief/Top Sales Executive | | \$ | \$ | \$ |
| Chief/Top Marketing Executive | | \$ | \$ | \$ |

Corporate Level Compensation (this section only needs to be completed once per company)

| | Number of Employees | Average Base Salary Per Person | Average Annual Bonus Per Person | Average Annual Commission Per Person |
|---------------------------------------|---------------------|--------------------------------|---------------------------------|--------------------------------------|
| Chief/Top Agronomic Executive | | \$ | \$ | \$ |
| Chief/Top Golf Operations Executive | | \$ | \$ | \$ |
| Chief/Top Food and Beverage Executive | | \$ | \$ | \$ |
| Regional Operations Executive | | \$ | \$ | \$ |

Employee Health Benefits/Policies

1a. Does your company offer employees a Paid-Time-Off (PTO) policy in lieu of separate leave policies?
 Yes No (Go to Question 2)

1b. If “yes”, how many days are provided per year?

| | Salaried Employees | Hourly Employees |
|-----------------------------|--------------------|------------------|
| Less than 1 year on the job | _____ days | _____ days |
| 1 year | _____ days | _____ days |
| 2 to 5 years | _____ days | _____ days |
| 6 to 10 years | _____ days | _____ days |
| Over 10 years | _____ days | _____ days |

2. Number of paid vacation days per year (indicate “0” if none—or skip question if PTO plan is provided):

| | Salaried Employees | Hourly Employees |
|-----------------------------|--------------------|------------------|
| Less than 1 year on the job | _____ days | _____ days |
| 1 year | _____ days | _____ days |
| 2 to 5 years | _____ days | _____ days |
| 6 to 10 years | _____ days | _____ days |
| Over 10 years | _____ days | _____ days |

3. Does your company provide health insurance for employees? Yes No

If health insurance is provided, what type(s) of plans do you offer? Check all that apply.

Traditional Indemnity (i.e., Blue Cross) HMO PPO POS High deductible/HAS Other _____

4. What percentage of the health insurance premiums are paid by:

| | Executive Level | |
|-------------------------------------|---------------------|-----------------|
| | Individual Coverage | Family Coverage |
| Employer | _____ % | _____ % |
| Employee | _____ % | _____ % |
| Total | 100% | 100% |
| 5. What are the deductible amounts? | \$ _____ | \$ _____ |

6. What percent of your company’s operating budget is devoted to employee health insurance expenses? _____%

7. In addition to major medical, which of the following coverages does your company offer? Check all that apply.

- Dental Mental health Employee Assistance Plan (EAP) Long-term disability
 Prescription drug Wellness Short-term disability Life insurance
 Vision

8a. What did the company pay in health insurance premiums for all staff during the most recent fiscal year? \$ _____

8b. How many employees are covered with respect to the health insurance premiums listed above? _____

8c. What percentage increase in health insurance premiums did your company most recently experience? _____%

Retirement Benefits

1. Does your company offer a retirement plan to employees? Yes No

2. If "yes," what type of plan(s)? Check all that apply.

- Defined Benefit Plan (Pension) ESOP Profit Sharing
 401(k) Simple IRA Other _____
 SEP IRA

3. When are eligible employees vested in this plan (other than the safe harbor portion of the plan, if any)?

- Immediate Cliff vesting, 100% after _____ years Graduated vesting, 100% after _____ years

DEFINED BENEFIT (PENSION) ONLY

4. What is the basis for your defined benefit plan? Check only one.

- Final average compensation Career average compensation Life cycle plan Cash balance Other _____

5a. Is your company's defined benefit plan under-funded? Yes No

5b. If "yes," what percentage is the plan under-funded? _____%

DEFINED CONTRIBUTION AND/OR 401(K) PLANS ONLY

6. Are employees auto-enrolled into your defined contribution and/or 401(K) plan? Yes No

7. What is the maximum company contribution as a percentage of base salary? _____%

8. What is the maximum employee contribution as a percentage of base salary? _____%

9. Does your company match employee contributions? Yes No

10. If "yes," what are the matching terms?

_____ % match, up to a maximum of _____ (% of salary or dollar amount)

OTHER PLANS

11a. Do you allow employee participation in retirement and rebate plans offered by industry suppliers (i.e., Golf Retirement Plus)?

- Yes No

11b. If "yes," do you review and track this participation? Yes No

Other Benefits

1. Other Employee Benefits (Check all that apply)

- Section 125 cafeteria plan (pre-tax flexible spending accounts)
- Section 132 qualified transportation plan (pre-tax transit, parking reimbursement)
- Section 127 tuition reimbursement plan

2a. Does your company offer a vehicle allowance to some staff? Yes No

2b. If a vehicle allowance is offered, what is the monthly amount? \$ _____

3. Does your company offer a dining allowance to some staff? Yes No

4a. Does your company pay respective professional association dues on behalf of staff members? Yes No

4b. If “yes,” please indicate for which association the company is paying dues. Check all that apply.

- PGA
- GCSAA
- LPGA
- AGM
- CMAA
- HFTP
- USPTA
- Other _____

While We Have You...

1. Does your company participate in the Department of Labor non-immigrant H-2B program? Yes No

1b. If “yes”, how many H-2B visa employees do you have per year across all facilities? _____

2. What changes is your company making because of minimum wage increases?

- Reducing staff
- No change – absorbing cost, total expense increase
- Cutting expenses in other areas to accommodate the wage increase
- Raising prices – passing the increase on to the customer
- Other _____

3. How does your company determine pay increases for staff? Check all that apply.

- Guidance from NGCOA Compensation Study
- Cost-of-living adjustments (COLA) based on inflation
- Merit-based increases from performance evaluations
- Adjustments based on local pay scales
- Pre-determined pay scales
- Experience-based increases (seniority)
- Certification or skill acquisition bonuses
- Company performance bonuses
- Retention bonuses to reduce turnover
- Promotions to higher positions
- No formal system for determining raises
- Other _____

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Thank you for participating!