FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* ANDERSON ERIK J					2. Issuer Name and Ticker or Trading Symbol Topgolf Callaway Brands Corp. [MODG]								(Check a	II applical Director	ble)	10% Owr		ner
(Last) (First) (Middle) 2180 RUTHERFORD ROAD					3. Date of Earliest Transaction (Month/Day/Year) 02/28/2023								Officer (give title Other (specify below) below)					
(Street) CARLSBAD CA 92008 (City) (State) (Zip)			4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					۱	
			I - Non-Deriva	ativ	e Secui	ities	Acau	ired	Disi	nosed (of or	Renef	icially ()wned				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Ye		2A. Deemed Execution Date,		3. Tran Code	3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		ed (A) or	5. Amount of Securities Beneficially Owned Follow		6. Ownersh Form: Direc (D) or		i Indirect Beneficial Ownership	
							Code	Code V		Amount (A		Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock			02/28/202	12/28/2023			S		2	5,000	D	\$23.4	5 56	9,321	1 I		By WestRiver Management, LLC ⁽¹⁾	
Common	Stock												2,7	37,484	I		By TC Invest LLC ⁽¹	ors,
Common Stock													60	4,998	98 I		By TGP Investors II, LLC ⁽¹⁾	
Common Stock												9,351		I		By TGP Advisors, LLC ⁽¹⁾		
Common Stock												38,591		I		Famil	ments,	
Common Stock													20	20,092				
		Tal	ble II - Derivat (e.g., pu	ive	Securit	ies A	cquir	ed, D	oispo	osed of	, or B	Benefic ecuriti	cially Ov	vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Tra	nsaction de (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expiration (Month/Da		xercisable and n Date		itle and ount of urities lerlying ivative urity (Ins	8. Prio Deriva Secur (Instr.	ative de ity Se 5) Be Ov Fo Re	Number of rivative curities neficially whed llowing ported ansaction(s) str. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	rship (D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	de V	(A)		Date Exercisa	able	Expiratio Date	n Title	Amou or Numb of Share	er					

Explanation of Responses:

1. WestRiver Management, LLC ("WestRiver Management") is the sole managing member of TGP Advisors, LLC ("TGP Advisors") and TGP Manager, LLC ("TGP Manager"). TGP Manager is the sole managing member of TGP Investors, LLC ("TGP II") and TGP Investors II, LLC ("TGP II") and in such capacity is responsible for voting decisions with respect to certain matters regarding the Issuer's securities held by TGP and TGP II. The Reporting Person is the sole member and sole manager of WestRiver Management and the sole manager of Anderson Family Investments, LLC ("AFI"). As a result, the Reporting Person may be deemed to beneficially own the securities held of record by TGP, TGP II, TGP Advisors, TGP Manager, WestRiver Management and AFI. The Reporting Person disclaims beneficial ownership of the securities reported herein, except to the extent of such Reporting Person's pecuniary interest therein.

Remarks:

/s/ Erik J Anderson

03/01/2023

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.