

Form **990**
Department of the Treasury
Internal Revenue Service

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
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2018, and ending 12-31-2018

- B** Check if applicable
- Address change
 - Name change
 - Initial return
 - Final return/terminated
 - Amended return
 - Application pending

C Name of organization
UNITED STATES TENNIS ASSOCIATION INCORPORATED

% USTA ACCOUNTING DEPT
Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
70 WEST RED OAK LANE

City or town, state or province, country, and ZIP or foreign postal code
WHITE PLAINS, NY 10604

D Employer identification number
13-5459420

E Telephone number
(914) 696-7000

G Gross receipts \$ 355,678,388

F Name and address of principal officer
PATRICK GALBRAITH
70 WEST RED OAK LANE
WHITE PLAINS, NY 10604

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status 501(c)(3) 501(c) (6) ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ WWW.USTA.COM

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1973

M State of legal domicile NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO PROMOTE AND DEVELOP THE GROWTH OF TENNIS AS A MEANS OF HEALTHFUL RECREATION AND PHYSICAL FITNESS

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	14
4 Number of independent voting members of the governing body (Part VI, line 1b)	13
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	875
6 Total number of volunteers (estimate if necessary)	500
7a Total unrelated business revenue from Part VIII, column (C), line 12	431,933
7b Net unrelated business taxable income from Form 990-T, line 34	175,195

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	18,748,567	18,590,278
9 Program service revenue (Part VIII, line 2g)	260,674,533	292,420,183
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10,466,766	7,488,846
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,025,545	1,840,811
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	291,915,411	320,340,118
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	74,298,735	74,502,713
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	52,667,785	58,126,787
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	155,012,450	165,277,811
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	281,978,970	297,907,311
19 Revenue less expenses Subtract line 18 from line 12	9,936,441	22,432,807
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	382,617,940	387,051,404
21 Total liabilities (Part X, line 26)	73,853,536	72,088,464
22 Net assets or fund balances Subtract line 21 from line 20	308,764,404	314,962,940

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer: ***** Date: 2019-11-14

GORDON SMITH EXECUTIVE DIR, CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date

Check if self-employed PTIN P01384178

Firm's name ▶ BDO USA LLP Firm's EIN ▶

Firm's address ▶ 100 PARK AVENUE Phone no (212) 885-8000
NEW YORK, NY 100175001

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission

USTA IS THE NATIONAL GOVERNING BODY FOR THE SPORT OF TENNIS AND THE RECOGNIZED LEADER IN PROMOTING AND DEVELOPING THE SPORT'S GROWTH ON EVERY LEVEL IN THE UNITED STATES, FROM LOCAL COMMUNITIES TO THE CROWN JEWEL OF THE PROFESSIONAL GAME, THE US OPEN THE USTA IS A PROGRESSIVE AND DIVERSE NOT-FOR-PROFIT ORGANIZATION WHOSE VOLUNTEERS, PROFESSIONAL STAFF AND FINANCIAL RESOURCES SUPPORT A SINGLE MISSION TO PROMOTE AND DEVELOP THE GROWTH OF TENNIS THE USTA HAS OVER 629,510 INDIVIDUAL MEMBERS, 5,533 ORGANIZATIONAL MEMBERS AND A PROFESSIONAL STAFF AND VOLUNTEERS DEDICATED TO GROWING THE GAME

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

See Additional Data

4b (Code) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

See Additional Data

4c (Code) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

See Additional Data

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 0

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		No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		No
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	Yes	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		No
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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	Yes	
c 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	Yes	
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		No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		No
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	Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
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 foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	Yes	
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	Yes	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 23 through 38 regarding compensation, bond issues, escrow accounts, 501(c)(3) organizations, and other IRS filing requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

<p>2a 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</p>	2a	875			
<p>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>			2b	Yes	
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>			3a	Yes	
<p>b If "Yes," has it filed a Form 990-T for this year?<i>If "No" to line 3b, provide an explanation in Schedule O</i></p>			3b	Yes	
<p>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</p>			4a		No
<p>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)</p>					
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>			5a		No
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>			5b		No
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>			5c		
<p>6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?</p>			6a		No
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>			6b		
7 Organizations that may receive deductible contributions under section 170(c).					
<p>a 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?</p>			7a		
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>			7b		
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>			7c		
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	7d				
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>			7e		
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>			7f		
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>			7g		
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>			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					
<p>9a Did the sponsoring organization make any taxable distributions under section 4966?</p>			9a		
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>			9b		
10 Section 501(c)(7) organizations. Enter					
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	10a				
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	10b				
11 Section 501(c)(12) organizations. Enter					
<p>a Gross income from members or shareholders</p>	11a				
<p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</p>	11b				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year</p>	12b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
<p>a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O</p>			13a		
<p>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</p>	13b				
<p>c Enter the amount of reserves on hand</p>	13c				
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>			14a		No
<p>b If "Yes," has it filed a Form 720 to report these payments?<i>If "No," provide an explanation in Schedule O</i></p>			14b		
<p>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N</p>			15	Yes	
<p>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</p>			16		No

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (14); 1b Enter the number of voting members included in line 1a, above, who are independent (13); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (No); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (Yes); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (Yes); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (Yes); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? (Yes); 8b Each committee with authority to act on behalf of the governing body? (Yes); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (No); 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (Yes); 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (Yes); 13 Did the organization have a written whistleblower policy? (Yes); 14 Did the organization have a written document retention and destruction policy? (Yes); 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? 15a The organization's CEO, Executive Director, or top management official (Yes); 15b Other officers or key employees of the organization (Yes); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (Yes); 16b 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? (Yes).

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed (CA, FL); 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply: Own website, Another's website, Upon request (checked), Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year; 20 State the name, address, and telephone number of the person who possesses the organization's books and records (UST-A ACCOUNTING DEPT 70 WEST RED OAK LANE WHITE PLAINS, NY 10604 (914) 696-7000).

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
1c Total from continuation sheets to Part VII, Section A										
1d Total (add lines 1b and 1c)								8,672,009	0	689,209

1b Sub-Total			
1c Total from continuation sheets to Part VII, Section A			
1d Total (add lines 1b and 1c)		8,672,009	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 134

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
DELOITTE CONSULTING LLP, 4022 SELLS DRIVE HERMITAGE, TN 37076	DIGITAL TRANSFORMATI	6,548,385
HORIZON MEDIA INC, 75 VARICK STREET NEW YORK, NY 10013	MEDIA ENGAGEMENT	2,957,326
IBM CORPORATION, 1 NORTH CASTLE DRIVE ARMONK, NY 10504	DIGITAL ENHANCEMENT	2,744,200
ALORICA INC, 8151 PETERS ROAD PLANTATION, FL 33324	MEMBER CALL CENTER	2,438,332
SMTIDS, 10275 CENTURION CT JACKSONVILLE, FL 32256	DIGITAL CONSULTING	2,163,546

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 131

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b	18,540,278			
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	50,000			
	g Noncash contributions included in lines 1a - 1f \$ _____					
	h Total. Add lines 1a-1f		18,590,278			
Program Service Revenue	2a TOURNAMENT RELATED	Business Code				
		713940	291,037,835	291,037,835		
	b TENNIS PROGRAM FEES	713940	1,240,108	1,240,108		
	c BALL TEST FEES	713940	142,240	142,240		
	d _____					
	e _____					
	f All other program service revenue					
g Total. Add lines 2a-2f		292,420,183				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		2,808,822		2,808,822	
	4 Income from investment of tax-exempt bond proceeds		0			
	5 Royalties		1,408,878		1,408,878	
	6a Gross rents	(i) Real				
		(ii) Personal				
		b Less rental expenses				
		c Rental income or (loss)	0	0		
	d Net rental income or (loss)		0			
	7a Gross amount from sales of assets other than inventory	(i) Securities	39,451,854	566,440		
		(ii) Other				
		b Less cost or other basis and sales expenses	34,967,270	371,000		
		c Gain or (loss)	4,484,584	195,440		
	d Net gain or (loss)		4,680,024		4,680,024	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a	0			
		b Less direct expenses	0			
c Net income or (loss) from fundraising events			0			
9a Gross income from gaming activities See Part IV, line 19	a	0				
	b Less direct expenses	0				
	c Net income or (loss) from gaming activities		0			
10a Gross sales of inventory, less returns and allowances	a	0				
	b Less cost of goods sold	0				
	c Net income or (loss) from sales of inventory		0			
Miscellaneous Revenue	Business Code					
11a ADVERTISING	541800	431,933		431,933		
b _____						
c _____						
d All other revenue						
e Total. Add lines 11a-11d		431,933				
12 Total revenue. See Instructions		320,340,118	292,420,183	431,933	8,897,724	

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	73,975,600			
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	527,113			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0			
4 Benefits paid to or for members.	0			
5 Compensation of current officers, directors, trustees, and key employees.	6,676,900			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7 Other salaries and wages.	42,321,820			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	1,616,606			
9 Other employee benefits.	4,540,639			
10 Payroll taxes.	2,970,822			
11 Fees for services (non-employees)				
a Management.	0			
b Legal.	1,974,027			
c Accounting.	238,333			
d Lobbying.	0			
e Professional fundraising services. See Part IV, line 17.	0			
f Investment management fees.	719,228			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	11,825,054			
12 Advertising and promotion.	5,339,506			
13 Office expenses.	2,894,080			
14 Information technology.	8,046,158			
15 Royalties.	0			
16 Occupancy.	3,898,060			
17 Travel.	13,948,207			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19 Conferences, conventions, and meetings.	646,597			
20 Interest.	0			
21 Payments to affiliates.	0			
22 Depreciation, depletion, and amortization.	10,879,604			
23 Insurance.	3,744,183			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a EVENT/PLAYER COMPENSATION	55,673,639			
b TENNIS EVENT PRODUCTIONS	13,496,504			
c MEMBERSHIP CALL CENTER EXP	4,430,015			
d PRINTING & PUBLICATIONS	3,681,756			
e All other expenses	23,842,860			
25 Total functional expenses. Add lines 1 through 24e.	297,907,311			
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	264,355	1	1,363,650
	2 Savings and temporary cash investments	56,244,405	2	88,506,315
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	28,443,560	4	45,256,546
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	6,025,077	7	5,327,795
	8 Inventories for sale or use	996,603	8	1,331,855
	9 Prepaid expenses and deferred charges	3,410,812	9	4,595,516
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 130,040,833		
	b Less accumulated depreciation	10b 44,381,934	85,498,155	10c 85,658,899
	11 Investments—publicly traded securities	56,538,380	11	31,871,273
	12 Investments—other securities See Part IV, line 11	119,778,193	12	99,178,340
	13 Investments—program-related See Part IV, line 11	21,427,448	13	23,837,082
	14 Intangible assets	0	14	0
	15 Other assets See Part IV, line 11	3,990,952	15	124,133
16 Total assets. Add lines 1 through 15 (must equal line 34)	382,617,940	16	387,051,404	
Liabilities	17 Accounts payable and accrued expenses	30,863,356	17	32,465,760
	18 Grants payable	0	18	0
	19 Deferred revenue	41,773,537	19	38,424,061
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	1,216,643	25	1,198,643
	26 Total liabilities. Add lines 17 through 25	73,853,536	26	72,088,464
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	308,764,404	27	314,962,940
	28 Temporarily restricted net assets	0	28	0
	29 Permanently restricted net assets	0	29	0
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	308,764,404	33	314,962,940	
34 Total liabilities and net assets/fund balances	382,617,940	34	387,051,404	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	320,340,118
2	Total expenses (must equal Part IX, column (A), line 25)	2	297,907,311
3	Revenue less expenses Subtract line 2 from line 1	3	22,432,807
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	308,764,404
5	Net unrealized gains (losses) on investments	5	-10,246,246
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 in Schedule O)	9	-5,988,025
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	314,962,940

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled 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?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 13-5459420

Name: UNITED STATES TENNIS ASSOCIATION INCORPORATED

Form 990 (2018)

Form 990, Part III, Line 4a:

US OPEN - SEE SCHEDULE O

Form 990, Part III, Line 4b:
COMMUNITY TENNIS DEVELOPMENT - SEE SCHEDULE O

Form 990, Part III, Line 4c:

PROFESSIONAL TENNIS OPERATIONS DIVISION - SEE SCHEDULE O

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Katrina Adams Chairman & President	19 0 5 0	X		X				40,949	0	0
Patrick Galbraith FIRST VICE PRESIDENT	10 0 7 0	X		X				25,000	0	0
Joan Baker VICE PRESIDENT	9 0 7 0	X		X				20,000	0	0
Mark Ein VICE PRESIDENT	9 0 4 0	X		X				20,000	0	0
Thomas Ho Secretary & Treasurer	9 0 4 0	X		X				20,000	0	0
FABRIZIO ALCOBE-FIERRO Director	5 0 6 0	X						10,000	0	0
Jeffrey M Baill DIRECTOR	5 0 3 0	X						10,000	0	0
Lauren B Barnikow Director	5 0 3 0	X						10,000	0	0
Laura F Canfield DIRECTOR	5 0 3 0	X						10,000	0	0
Dr Brian Hainline DIRECTOR	5 0 3 0	X						10,000	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Liesel H Huber DIRECTOR	5 0 3 0	X						10,000	0	0
Michael J McNulty III Director	5 0 3 0	X						10,000	0	0
Brian Vahaly DIRECTOR	5 0 3 0	X						10,000	0	0
Andrew Valdez DIRECTOR	5 0 3 0	X						10,000	0	0
Gordon Smith Executive Director, CEO	35 0 20 0			X				1,265,279	0	159,593
Andrea Hirsch CAO & GENERAL COUNSEL	40 0 0 0			X				823,744	0	30,791
EDWARD NEPPL Chief Financial Officer	40 0 0 0			X				633,371	0	46,565
LEWIS SHERR Chief Revenue Officer	40 0 0 0				X			1,130,675	0	51,746
Stacey Milkovich CHIEF EXECUTIVE, PRO TENNIS	40 0 0 0				X			861,232	0	53,013
Kurt Kamperman chief exec , national campus	40 0 0 0				X			792,414	0	51,746

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CRAIG MORRIS chief exec , COMM TENNIS&YOUTH	40 0 0 0				X			517,136	0	43,646
AMY WESLY CHIEF MARKETING OFFICER	40 0 0 0					X		629,650	0	51,332
DAVID BREWER CHIEF PRO TENNIS OFFICER	40 0 0 0					X		546,112	0	51,746
PAUL MAYA Chief Technology Officer	40 0 0 0					X		464,631	0	51,746
CHRISTIAN WIDMAIER MANAGING DIR CORP COMMUNICAT	40 0 0 0					X		401,232	0	50,720
Staciellen Mischel Assoc Gen Counsel & dep clo	40 0 0 0					X		390,584	0	46,565

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

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2018
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If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
 ● Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
 ● Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
 ● Section 527 organizations Complete Part I-A only
If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
 ● Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
 ● Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A
If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
 ● Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization UNITED STATES TENNIS ASSOCIATION INCORPORATED	Employer identification number 13-5459420
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions) _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- 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)
- B** Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

	(a) Filing organization's totals	(b) Affiliated group totals
--	----------------------------------	-----------------------------

- 1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a If zero or less, enter -0-
- i** Subtract line 1f from line 1c If zero or less, enter -0-
- j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

Yes No

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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 on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

	(a)		(b)
	Yes	No	Amount
1 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			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1 Yes	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2 Yes	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	No

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
a Current year	2a
b Carryover from last year	2b
c Total	2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4
5 Taxable amount of lobbying and political expenditures (see instructions)	5

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
------------------	-------------

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number
13-5459420

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part 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 (e g , recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation 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 Year	
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part 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 SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years 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 of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | | |
|--|-----|----|
| (i) unrelated organizations | Yes | No |
| (ii) related organizations | | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		59,673,635	7,213,331	52,460,304
d Equipment		58,741,597	29,336,712	29,404,885
e Other		11,625,601	7,831,891	3,793,710
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				85,658,899

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) COMMON TRUST & PVT MUTUAL FUND	42,518,919	F
(B) ALTERNATIVE INVESTMENTS	56,659,421	F
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.) ▶	99,178,340	

Part VIII Investments—Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) CINCINNATI TENNIS	19,596,426	C
(2) TRIDENTS LTD LAVER CUP	4,240,656	C
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.) ▶	23,837,082	

Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
POST RETIREMENT BENEFITS	1,131,143
LONG TERM SCHOLARSHIPS PAYABLE	67,500
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	1,198,643

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 FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
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	

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 13-5459420

Name: UNITED STATES TENNIS ASSOCIATION INCORPORATED

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	UNITED STATES TENNIS ASSOCIATION INCORPORATED (THE "REPORTING ORGANIZATION") IS A NOT-FOR-PROFIT ORGANIZATION THAT IS EXEMPT FROM INCOME TAXES UNDER THE CODE, EXCEPT FOR IMMATERIAL AMOUNTS OF INCOME CONSIDERED BY THE INTERNAL REVENUE SERVICE (IRS) TO BE UNRELATED BUSINESS TAXABLE INCOME, FOR WHICH INCOME TAXES HAVE BEEN PROVIDED. THE REPORTING ORGANIZATION HAS FILED ALL APPLICABLE RETURNS WHEN REQUIRED. THE REPORTING ORGANIZATION'S SHARE OF INCOME TAXES FOR CINCINNATI TENNIS LLC HAS BEEN PROVIDED, PURSUANT TO THE OPERATING AGREEMENT WITH THE OTHER MEMBERS OF THESE ORGANIZATIONS. FOR THE YEAR ENDED DECEMBER 31, 2018, THERE WERE NO INTEREST OR PENALTIES REQUIRED TO BE RECORDED OR DISCLOSED IN THE CONSOLIDATED FINANCIAL STATEMENTS. IN ADDITION, THE REPORTING ORGANIZATION HAS NOT TAKEN AN UNSUBSTANTIATED TAX POSITION THAT WOULD REQUIRE PROVISION OF A LIABILITY. THE REPORTING ORGANIZATION BELIEVES IT IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR THE YEARS PRIOR TO 2015.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number 13-5459420

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 47
3 Enter total number of other organizations listed in the line 1 table 57

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
See Additional Data Table					
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2	The association monitors the use of grant funds paid to the sections by requiring the sections to submit their annual audited financial statements and form 990. The sections also must file a section funding accountability report annually. Organizations receiving public facility funding grants must complete an extensive application for funding and must receive permission in writing to deviate from the proposed spending plan. Grantees must submit a grant application which requires submission of the total project budget and detailed spending plan. Successful completion of the grant process includes technical reviews with USTA consultants for projects requiring reconstruction or new construction of a facility. If awarded, prior to receiving their funds, facility grant recipients are required to submit an accountability form that is reviewed by staff and/or USTA consultants to ensure the project has been completed as approved. The accountability process requires grantees to submit fiscal and narrative end-of-project reports detailing the results of their projects. Recipients of tournament/championship grants are required to submit reports following the completion of their events detailing the results of the events and all expenditures.

Additional Data

Software ID:
Software Version:
EIN: 13-5459420
Name: UNITED STATES TENNIS ASSOCIATION INCORPORATED

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USTA Player Development Inc 70 w red oak lane white plains, NY 10604	27-1368195	501(C)(3)	19,578,474				prog support/youth
USTASouthern Section 5685 S Dr Peachtree Corners, GA 30092	58-1190935	501(C)(4)	11,318,688				Section Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USTAMidwest Section 1310 East 96th St Indianapolis, IN 46240	23-7417933	501(C)(4)	5,502,556				Section Grant
USTATexas Section 8105 Exchange Dr Austin, TX 78754	74-2182392	501(C)(4)	3,559,866				Section Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USTA Eastern Section 70 W Red Oak Lane White Plains, NY 10604	13-5042070	501(C)(4)	3,458,460				Section Grant
USTANorthern California Section 1920 North Loop Rd Alameda, CA 94502	94-1057590	501(C)(3)	3,259,930				Section Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USTA Florida Section 12005 Performance Dr Orlando, FL 32827	23-7161642	501(C)(4)	3,139,711				Section Grant
USTASouthern California Section PO Box 240015 Los Angeles, CA 90024	95-1243600	501(C)(4)	3,057,673				Section Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USTA Intermountain Tennis Section 9145 E Kenyon Ave Denver, CO 80237	84-0726651	501(C)(4)	2,858,842				Section Grant
USTAMid-Atlantic Section 11410 I Newton Square N Reston, VA 20190	54-1472806	501(C)(3)	2,613,238				Section Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USTAMiddle States Section PO Box 987 Valley Forge, PA 19482	23-1688212	501(C)(4)	2,359,298				Section Grant
USTANew England 110 Turnpike Rd Westborough, MA 01581	04-6006570	501(C)(4)	2,249,640				Section Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USTAMissouri Valley Section 4121 W 83rd St Prairie Village, KS 66208	23-7416298	501(C)(4)	2,012,850				Section Grant
USTAPacific Northwest 9746 SW Nimbus Ave Beaverton, OR 97008	93-0853818	501(C)(3)	1,870,112				Section Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USTANorthern Section 1001 W 98th St Bloomington, MN 55431	41-1675510	501(C)(3)	1,297,135				Section Grant
USTASouthwest Section 7010 E Acoma Dr Scottsdale, AZ 85254	85-0254477	501(C)(4)	1,188,414				Section Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USTAHawaii Pacific Section 1888 Kalakaua Ave Honolulu, HI 96815	23-7297012	501(C)(4)	878,208				Section Grant
USTACaribbean Section PO Box 40439 San Juan, PR 00940	66-0413224	n/a	718,709				Section Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USTA Foundation Inc 70 W Red Oak Lane White Plains, NY 10604	13-3782331	501(C)(3)	529,443				Various Programs
Tennis Industry Association 117 E Center Hilton Head Island, SC 29928	51-0162283	501(C)(6)	400,000				Allied Partner

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Recreational Team Tennis 247 West 30th St New York, NY 10001	36-3764354	n/a	175,000				Allied Partner
International Tennis Hall of Fame Inc 194 Bellevue Ave Newport, RI 02840	13-6144356	501(C)(3)	78,700				Hall of Fame Grant/

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA of The Capital Area 350 S Foster Dr Baton Rouge, LA 70806	72-0408994	501(C)(3)	70,000				Facility Assistance
Nirsa Foundation 4185 SW Research Way Corvallis, OR 97333	93-1090612	501(C)(3)	62,840				Tennis On Campus

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
United States Professional Tennis Assoc 3535 Briarpark Dr Houston, TX 77042	74-1818176	501(C)(6)	56,250				Allied Partner
Nancy Lieberman Charities PO Box 261233 Plano, TX 75026	36-4642743	501(C)(3)	54,000				Program Support

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Billie Jean King Leadership Initiative 280 Park Ave 4th Fl New York, NY 10017	46-4755352	501(C)(3)	50,000				Program Support
Don't Ever Give Up Inc 14600 Weston Parkway Cary, NC 27513	47-5304184	501(C)(3)	50,000				Program Support

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Gateway Confluence Wheelchair Sports Fdn 402 W Oak St Millstadt, IL 62260	37-1380800	501(C)(3)	45,000				Wheelchair Grant
Tennessee Tennis Association 220 Athens Way Nashville, TN 37228	62-0992696	501(C)(4)	42,500				Facility Assistance

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Greater NY March of Dimes 233 Park Ave S 3rd Fl New York, NY 10003	13-1846366	501(C)(3)	32,500				Program Support
City of Raleigh PO Box 590 Raleigh, NC 27602	56-6000236	Government	29,700				Court Line Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Junior Tennis Champions Center 5200 Campus Dr College Park, MD 20740	52-2114223	501(C)(3)	25,000				Junior ITF
Lakeshore Foundation 4000 Ridgeway Dr Birmingham, AL 35209	63-0288847	501(C)(3)	23,825				Junior ITF

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Baton Rouge Wheelchair Tennis Assoc 19037 Epernay Ct Baton Rouge, LA 70817	58-1934935	501(C)(3)	22,500				Wheelchair Grant
City of Utica 1 Kennedy Plaza Utica, NY 13502	15-6000418	Government	20,000				Facility Assistance

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Borough of South Williamsport 329 W S Ave S Williamsport, PA 17702	24-6000659	Government	20,000				Facility Assistance
Court 16 Lic LLC 13-06 Queens Plaza S LI CITY, NY 11101	36-4885624	LLC	20,000				Facility Assistance

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Streator Township HS District #40 202 W Lincoln Ave Streator, IL 61364	36-6004925	School District	20,000				Facility Assistance
City of Roeland Park 4600 W 51st St Roeland Park, KS 66205	48-6077029	Government	20,000				Facility Assistance

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
City of Rome PO Box 1433 Rome, GA 30162	58-6000653	Government	18,000				Wheelchair Grant
East Central Independent School District 6634 Springs Rd San Antonio, TX 78263	74-1562392	School District	18,000				Facility Assistance

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Lincoln University 820 Chestnut St Jefferson City, MO 65102	44-6001089	501(C)(3)	17,500				Facility Assistance
Utah Tennis Association 2469 E Fort Union Blvd SL City, UT 84121	87-0335459	501(C)(4)	17,415				Multicultural/

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Stonington Community Center Inc 28 Cutler St Stonington, CT 06378	06-0665193	501(C)(3)	17,000				Facility Assistance
Kempton Community Recreation Center PO Box 42 Kempton, PA 19529	23-2063807	501(C)(3)	15,000				Court Line Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Women's Sports Foundation 247 West 30th St New York, NY 10001	23-7380557	501(C)(3)	15,000				Program Support
City of Thief River Falls 405 3rd St E Thief River Falls, MN 56701	41-6005572	Government	15,000				Facility Assistance

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Driving Force Group Inc 11140 Rockville Pike Rockville, MD 20852	45-4641567	501(C)(3)	15,000				Program Support
Unified School District #356 110 N Monnet Conway Springs, KS 67031	48-0727372	School District	15,000				Facility Assistance

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
City of Greensboro PO Box 3136 Greensboro, NC 27402	56-6000320	Government	15,000				Facility Assistance
City of Brandon 1000 Municipal Drive Brandon, MS 39042	64-6001505	Government	15,000				Facility Assistance

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
City of Natchitoches 700 Second St Natchitoches, LA 71457	72-6000931	Government	15,000				Facility Assistance
Fearlessly Girl USA 224 18th St Ste 300 Rock Island, IL 61201	82-1370182	501(C)(3)	15,000				Program Support

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hopkinton Youth Sports Assoc PO Box 803 Contoocook, NH 03229	02-0411367	501(C)(3)	14,350				Facility Assistance
Adaptive Athletics University of Arizona 1224 E Lowell St Tucson, AZ 85721	32-0295267	Educational Ins	14,000				Facility Assistance ProG /

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Arthur Ashe Institute For Urban Health 450 Clarkson Ave Brooklyn, NY 11203	11-3185372	501(C)(3)	13,936				Program Support
North Carolina Tennis Assoc 2709 Henry St Greensboro, NC 27405	56-1121513	501(C)(4)	13,741				Adult SR Championship Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Wisconsin Tennis Association W 6860 R Rd Fond Du Lac, WI 54937	39-6283503	501(C)(4)	13,000				Youth Team
YMCA of Greater New York 5 West 63rd St New York, NY 10023	13-1624228	501(C)(3)	12,500				Program Support

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hanover Park Park District 1919 Walnut Ave Hanover Park, IL 60133	36-2547889	Government	11,500				Facility Assistance
Northwest Wheelchair Tennis Association 910 Player Dr N Keizer, OR 97303	93-1063041	501(C)(3)	11,500				Wheelchair Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Bowdoin College 5600 College Station Brunswick, ME 04011	01-0215213	501(C)(4)	10,000				Facility Assistance
National Assoc of Asian American Prof 4850 Sugarloaf Pky Lawrenceville, GA 30044	11-3490724	501(C)(3)	10,000				Program Support

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Pittston Area School District 5 Stout Street Pittston, PA 18640	23-1668435	School District	10,000				Facility Assistance
Otsego County Sportsplex 1250 Gornick Ave Garylord, MI 49734	38-3216381	501(C)(3)	10,000				Facility Assistance

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Portage Public Schools 8107 Mustang DRIVE Portage, MI 49002	38-6001950	School District	10,000				Facility Assistance
Hayward Sports Center Inc PO Box 475 Hayward, WI 54843	39-1318184	501(C)(3)	10,000				Court Line Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Madison Central School District 39-2 800 NE 9th STREET Madison, SD 57042	46-0277289	School District	10,000				Court Line Grant
City of Milbank 1001 E 4th Ave Milbank, SD 57252	46-6000291	Government	10,000				Facility Assistance

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Nebraska Board of Regents 3835 Holdrege Street Lincoln, NE 68503	47-0049123	501(C)(3)	10,000				Facility Assistance
Rockingham County Tennis Assoc 102 E Murphy Street Madison, NC 27025	47-1834568	501(C)(3)	10,000				Facility Assistance

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
City of Elizabeth City 306 E Col Ave Elizabeth City, NC 27909	56-6000226	Government	10,000				Facility Assistance
Furman University 3300 Poinsett Highway Greenville, SC 29613	57-0314395	501(C)(3)	10,000				Court Line Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Fermata Club PO Box 752 Aiken, SC 29801	57-0335225	501(C)(7)	10,000				Court Line Grant
Professional Tennis Registry PO Box 4739 Hilton Head, SC 29938	57-0795565	501(C)(6)	10,000				Wheelchair Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Salvation Army A Georgia Corp PO Box 1205 WinstonSalem, SC 27102	58-0660607	501(C)(3)	10,000				Facility Assistance
Shorter University 315 Shorter Avenue Rome, GA 30165	58-2624570	501(C)(3)	10,000				Court Line Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
University of Central Florida Board of Trustees 12424 Research Parkway Orlando, FL 32826	59-2924021	Educational Ins	10,000				Wheelchair Grant
Springdale Sch District No50 804 West Johnson Ave Springdale, AR 72765	71-6021364	School District	9,900				Facility Assistance

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Metropolitan Tennis & Education Group 13142 Brooktree Lane Laurel, MD 20707	46-1950434	501(C)(3)	9,850				Multicultural Grant
City of Coppell 101 1st St SE Coppell, TX 75019	75-1183207	Government	9,700				Court Line Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Sturgis Public Schools 107 W West St Sturgis, MI 49091	38-6003657	School District	9,600				Facility Assistance
Montana Tennis Association 415 N Higgins Ave Missoula, MT 59802	81-0392068	501(C)(4)	9,000				Youth Team

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Sloane Stephens Foundation Inc 511 SE 5th Ave Ft Lauderdale, FL 33301	36-4760242	501(C)(3)	8,700				Court Line Grant
La Jolla Beach & Tennis Club 2000 Spindrift Dr La Jolla, CA 92037	33-0265921	n/a	8,268				Adult Senior

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA of Reading and Berks County 631 Washington St Reading, PA 19601	23-1244009	501(C)(3)	8,000				Facility Assistance
Seymour Independent School District 409 W Idaho Seymour, TX 76380	75-6002434	School District	8,000				Facility Assistance

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Central Indiana Tennis Assoc 1050 E 86th St Indianapolis, IN 46240	35-1404837	501(C)(4)	7,743				Youth Team
Harlem Jr Tennis & Education Program Inc 40 West 143rd Street New York, NY 10037	13-3076419	501(C)(3)	7,500				Program Support

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Parks Foundation of Miami-Dade Inc 275 NW 2nd Street Miami, FL 33128	20-0924393	501(C)(3)	7,500				Facility Assistance
NY Junior Tennis League Inc 58-12 Queens Blvd Woodside, NY 11377	23-7442256	501(C)(3)	7,500				Program Support

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Washington Tennis & Education Fdn 5220 16th St NW Washington, DC 20011	52-6046504	501(C)(3)	7,500				Program Support
Cliff Drysdale Management Inc 625 M Valley Rd New Braunfels, TX 78132	65-0967292	Corporation	7,500				Leagues Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Baseline Wheelchair Tennis Foundation 7290 Millbrook Oaks Dr Lakeland, FL 33813	03-0578203	501(C)(3)	7,414				Wheelchair Grant
Wheelchair Tennis of Indiana 4717 Boulevard Pl Indianapolis, IN 46208	47-4187695	501(C)(3)	7,271				Wheelchair Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mary Free Bed Rehabilitation Hospital 235 Wealthy St SE Grand Rapids, MI 49503	38-1359265	501(C)(3)	7,000				Wheelchair Grant
The Claremont Club 1777 Monte Vista Claremont, CA 91711	95-3627414	Corporation	7,000				Community

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UJA Federation of New York 130 East 59th Street New York, NY 10022	51-0172429	501(C)(3)	6,500				Program Support
Longwood Cricket Club 564 Hammond St Chestnut Hill, MA 02167	04-1554270	501(C)(7)	6,200				Adult Senior

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mobile Area Tennis Association 851 Gaillard Drive Mobile, AL 36608	20-0116253	501(C)(4)	6,000				Events Grant
Soldan 360 LLC 12821 Oulton Circle Orlando, FL 32832	83-0556902	LLC	6,000				Wheelchair Grant

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Greensboro Tennis Organization 5710 W G City Blvd Greensboro, NC 27407	56-2040725	501(C)(3)	5,638				Youth Team
Germantown Cricket Club 411 W Mainheim St Philadelphia, PA 19144	23-0620930	501(C)(7)	5,200				Adult Senior

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Wheelchair Grant	20	204,850			
Multicultural Grant	69	114,150			
Sr Int'l Play Grant	59	94,700			
Adult Senior Championship Grant	42	69,976			
Youth Team Tennis Grant	15	20,787			

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Junior ITF Event Grant	2	6,500			
International Travel Grant	6	6,000			
Leagues Grant	9	5,200			
Events Grant	2	3,000			
Court Line Grant - Youth	2	1,950			

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number
13-5459420

Part I Questions Regarding Compensation

		Yes	No		
<p>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.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </td> </tr> </table>	<input checked="" type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<input checked="" type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)				
<p>b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.</p>	1b	Yes			
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	2	Yes			
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee </td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee			
<input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee				
<p>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:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a		No		
	4b		No		
	4c		No		
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a				
	5b				
<p>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:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a				
	6b				
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>	7				
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>	8				
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9				

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.

Return Reference	Explanation
PART I, LINE 1A	FIRST CLASS TRAVEL. IN ACCORDANCE WITH THE TRAVEL POLICY, BOARD MEMBERS AND EMPLOYEES ABOVE DIRECTOR LEVEL ARE ENTITLED TO BUSINESS CLASS AIRFARES FOR FLIGHTS GREATER THAN FIVE HOURS. THE PRESIDENT AND FIRST VP ARE ENTITLED TO BUSINESS CLASS AIRFARES FOR ALL FLIGHTS. IN THE EVENT BUSINESS CLASS AIRFARE IS NOT AVAILABLE, THE ABOVE INDIVIDUALS ARE ENTITLED TO FIRST CLASS UNDER THE ASSOCIATION'S ACCOUNTABLE EXPENSE REIMBURSEMENT PLAN. TRAVEL FOR COMPANIONS. UNDER THE ASSOCIATION'S ACCOUNTABLE EXPENSE REIMBURSEMENT POLICY, TRAVEL FOR COMPANIONS IS ALLOWED IN VERY LIMITED CIRCUMSTANCES.



Schedule J (Form 990) 2018

Additional Data

Software ID:

Software Version:

EIN: 13-5459420

Name: UNITED STATES TENNIS ASSOCIATION INCORPORATED

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Gordon Smith Executive Director, CEO	(i)	838,173	414,361	12,745	132,299	27,294	1,424,872	86,219
	(ii)	0	0	0	0	0	0	0
Andrea Hirsch CAO & GENERAL COUNSEL	(i)	575,156	236,130	12,458	19,031	11,760	854,535	0
	(ii)	0	0	0	0	0	0	0
EDWARD NEPLL Chief Financial Officer	(i)	444,545	188,372	454	19,031	27,534	679,936	0
	(ii)	0	0	0	0	0	0	0
LEWIS SHERR Chief Revenue Officer	(i)	611,628	504,500	14,547	19,031	32,715	1,182,421	0
	(ii)	0	0	0	0	0	0	0
Stacey Milkovich CHIEF EXECUTIVE, PRO TENNIS	(i)	599,963	260,420	849	20,298	32,715	914,245	0
	(ii)	0	0	0	0	0	0	0
Kurt Kamperman chief exec , national campus	(i)	536,740	250,980	4,694	19,031	32,715	844,160	0
	(ii)	0	0	0	0	0	0	0
AMY WESLY CHIEF MARKETING OFFICER	(i)	462,494	166,860	296	13,686	37,646	680,982	0
	(ii)	0	0	0	0	0	0	0
DAVID BREWER CHIEF PRO TENNIS OFFICER	(i)	399,559	144,267	2,286	19,031	32,715	597,858	0
	(ii)	0	0	0	0	0	0	0
CRAIG MORRIS chief exec , COMM TENNIS&YOUTH	(i)	359,326	157,356	454	10,931	32,715	560,782	0
	(ii)	0	0	0	0	0	0	0
PAUL MAYA Chief Technology Officer	(i)	350,585	113,750	296	19,031	32,715	516,377	0
	(ii)	0	0	0	0	0	0	0
CHRISTIAN WIDMAIER MANAGING DIR CORP COMMUNICAT	(i)	301,796	98,587	849	19,031	31,689	451,952	0
	(ii)	0	0	0	0	0	0	0
Staciellen Mischel Assoc Gen Counsel & dep clo	(i)	288,996	101,134	454	19,031	27,534	437,149	0
	(ii)	0	0	0	0	0	0	0

Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**
 ▶ **Attach to Form 990 or Form 990-EZ.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number
13-5459420

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)
 Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.
 Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total						▶	\$					

Part III Grants or Assistance Benefiting Interested Persons.
 Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1) MARK EIN	DIRECTOR	175,000	GRANT	WORLD TEAM TENNIS PLAY

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) MARK EIN RECREATION TEAM TENNIS	DIRECTOR	130,000	CONSULTING FEES		No

Part V Supplemental Information

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

Return Reference	Explanation
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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.

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

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury

Name of the organization

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A	<p>US OPEN UNITED STATES TENNIS ASSOCIATION INCORPORATED("USTATHE "ASSOCIATION") ORGANIZES A ND CONDUCTS THE UNITED STATES OPEN TENNIS CHAMPIONSHIPS--THE US OPEN--WHICH IS THE ONE OF THE WORLD'S HIGHEST-ATTENDED ANNUAL SPORTING EVENTS AND ONE OF ITS PREMIER SPORTING ATTRAC TIONS THE US OPEN IS HELD EACH YEAR AT THE USTA BILLIE JEAN KING NATIONAL TENNIS CENTER STAGING THE US OPEN REQUIRES THE DEDICATION AND TALENTS OF NUMEROUS USTA VOLUNTEERS, USTA STAFF, AND SEASONAL HELP TO RUN THIS TENNIS TOURNAMENT EFFICIENTLY AND EFFECTIVELY THE US OPEN HELPS FULFILL MANY OF THE USTA'S MAJOR PURPOSES, INCLUDING TO PROMOTE THE DEVELOPME NT OF TENNIS AS A MEANS OF HEALTHFUL RECREATION AND PHYSICAL FITNESS, TO ORGANIZE TENNIS T OURNAMENTS AND COMPETITIONS FOR ALL TENNIS ATHLETES WITHOUT REGARD TO GENDER, RACE, CREED, COLOR, OR NATIONAL ORIGIN, AND UNDER THE BEST CONDITIONS POSSIBLE, AND TO PROMOTE THE GAM E OF TENNIS TO THE GENERAL PUBLIC IT IS A MAJOR EXPECTATION OF THE US OPEN THAT THE FANS' ENTHUSIASM AND EXCITEMENT FOR THE EVENT WILL ENCOURAGE THEIR INTEREST IN TENNIS AND DRIVE PARTICIPATION IN THE SPORT AS THE PREMIER SHOWCASE FOR TENNIS IN THE UNITED STATES, THE US OPEN USES ITS WORLD-WIDE STAGE TO HELP GROW THE GAME THE 2018 US OPEN KICKED OFF WITH THE 23RD ANNUAL ARTHUR ASHE KIDS' DAY, THE WORLD'S LARGEST SINGLE-DAY, GRASS-ROOTS TENNIS AND ENTERTAINMENT EVENT, WHICH CELEBRATES THE LIFE AND LEGACY OF ARTHUR ASHE THE EVENT CO NTINUES ASHE'S MISSION OF USING TENNIS AS A MEANS TO INSTILL IN CHILDREN THE VALUES OF HUM ANITARIANISM, LEADERSHIP, AND EXCELLENCE THE MORNING GROUNDS FESTIVAL OF THE 2018 ARTHUR ASHE KIDS' DAY FEATURED KID-FRIENDLY TENNIS PROGRAMMING THROUGHOUT THE GROUNDS AND WAS FRE E TO THE PUBLIC, AND WAS FOLLOWED BY A STADIUM SHOW FEATURING A LINEUP OF TENNIS GREATS AN D MUSICAL GUESTS TO HELP MAXIMIZE THE FAN EXPERIENCE, THE TOURNAMENT IMPLEMENTED A SERIES OF IN-GAME INNOVATIONS ACROSS SEVERAL EVENTS TO INCREASE THE SPEED OF PLAY AND CREATE CON SISTENT STANDARDS FOR COMPETITORS THE 2018 US OPEN DREW A TOTAL OF 828,798 FANS OVER FAN WEEK PLUS THE TWO WEEKS OF THE MAIN DRAW THE SINGLE-DAY SESSION RECORD WAS SURPASSED THRE E TIMES, DRAWING A HIGH OF 43,128 ESPN SERVED FOR THE FOURTH YEAR AS THE US OPEN'S EXCLUS IVE DOMESTIC MEDIA PARTNER ESPN AVERAGED 1 MILLION VIEWERS AND ACHIEVED A TOTAL AUDIENCE REACH OF NEARLY 44 MILLION VIEWERS IN THE U S THE WOMENS SINGLES FINAL WAS THE MOST-VIEWE D EVER ON ESPN, AVERAGING 3 1 MILLION VIEWERS THE TOURNAMENTS DIGITAL PORPERTIES, USOPEN ORG, RESULTED IN 10 MILLION UNIQUE VISITORS AND 41 MILLION VISITS THE 2018 US OPEN EXPAND ED ON THE TOURNAMENT'S COMPREHENSIVE "GREEN" INITIATIVES AND CONTINUED TO MAKE THE US OPEN ONE OF THE EASIEST PLACES TO BE ECO-FRIENDLY AND ENVIRONMENTALLY SENSITIVE, FROM RECYCLIN G TO ENERGY MANAGEMENT</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4B	<p>COMMUNITY TENNIS DEVELOPMENT COMMUNITY TENNIS STRIVES TO GROW TENNIS AT EVERY LEVEL WITH A GOAL OF MAKING THE GAME ACCESSIBLE TO EVERYONE IT SUPPORTS A WIDE RANGE OF TENNIS PROGRAMS DESIGNED TO HELP PEOPLE LEARN THE GAME, PLAY THE GAME, AND TAKE ADVANTAGE OF ITS MANY HEALTH, FITNESS, AND SOCIAL BENEFITS IT IS THE GOAL OF COMMUNITY TENNIS TO HELP PEOPLE FIND THEMSELVES IN THE GAME AT EVERY STEP ALONG THE PLAY PATHWAY IN 2018, COMMUNITY TENNIS LAUNCHED NET GENERATION, THE NEW YOUTH BRAND OF THE USTA, TO CONSUMERS, EMBRACING ALL ASPECTS OF YOUTH PLAY AND HELPING TO DEVELOP A COMMON LANGUAGE AND SHAPE THE FUTURE OF TENNIS IN THE UNITED STATES IN ADDITION TO PROVIDING PLAY OPPORTUNITIES TO THE PUBLIC, COMMUNITY TENNIS IN 2018 ALSO HELPED DEVELOP THE NEXT GENERATION OF TENNIS INDUSTRY PROFESSIONALS THROUGH USTA-U, WHICH OFFERS RESOURCES AND EDUCATIONAL OPPORTUNITIES IN TEACHING TENNIS, CLUB AND EVENT MANAGEMENT, HOSPITALITY AND SPORTS SCIENCE COMMUNITY TENNIS WORKS WITH THE USTA'S 17 INDEPENDENTLY GOVERNED GEOGRAPHICAL SECTIONS ACROSS THE U.S., ALONG WITH MORE THAN TWO DOZEN NATIONAL USTA COMMITTEES (MADE UP OF LEADING VOLUNTEERS AND STAFF) AS WELL AS WITH THOUSANDS OF LOCAL VOLUNTEERS NATIONWIDE AND WITH TENNIS INDUSTRY PARTNERS ON NUMEROUS GRASS-ROOTS EFFORTS TO GROW THE GAME THIS INCLUDES THE LARGEST INITIATIVE EVER TO STRENGTHEN THE TENNIS INFRASTRUCTURE IN PUBLIC PARKS AND SCHOOLS, INCLUDING THE BUILDING AND/OR RENOVATION OF MORE THAN 30,000 PUBLIC TENNIS COURTS OTHER INITIATIVES INCLUDE DEVELOPING, STRENGTHENING, AND GROWING A NATIONWIDE NETWORK OF SELF-SUFFICIENT COMMUNITY TENNIS ASSOCIATIONS TO INCREASE TENNIS PARTICIPATION AT THE LOCAL LEVEL, PROMOTING AND PROVIDING DEVELOPMENT AND PLAY OPPORTUNITIES FOR PEOPLE IN WHEELCHAIRS TO BE INVOLVED IN THE SPORT OF TENNIS AS BOTH PLAYERS AND VOLUNTEERS, INTRODUCING TENNIS TO YOUTH THROUGH IN-SCHOOL PHYSICAL EDUCATION CLASSES AND AFTER-SCHOOL TENNIS PROGRAMS, AND PROMOTING AND PROVIDING RECREATIONAL AND COMPETITIVE LEAGUE TEAM OPPORTUNITIES FOR PLAYERS AGE 18 TO 90+ IN THE COUNTRY'S LARGEST RECREATIONAL TENNIS LEAGUE, USTA LEAGUE COMMUNITY TENNIS IS BASED AT THE USTA NATIONAL CAMPUS AT LAKE NONA IN ORLANDO, FLA., WHICH SERVES THE SPORT AT EVERY LEVEL OF PLAY AND DELIVERS AN UNPARALLELED TENNIS EXPERIENCE FOR PLAYERS OF ALL AGES AND ABILITY LEVELS THE FACILITY HAS 100 TENNIS COURTS AND IS DIVIDED INTO DEDICATED AREAS THAT FOCUS ON THE COMPLETE TENNIS PATHWAY NEARLY 250,000 VISITORS OF ALL AGES AND ABILITIES TRAVELED TO THE USTA NATIONAL CAMPUS IN 2018 TO BE A PART OF ITS UNPARALLELED PLAYING, TRAINING, AND EDUCATIONAL EXPERIENCE</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PART III, LINE 4C</p>	<p>PROFESSIONAL TENNIS OPERATIONS DIVISION THE USTA PROFESSIONAL TENNIS OPERATIONS DIVISION CONSISTS OF PROFESSIONAL TOURNAMENTS, OFFICIATING, AND MAJOR EVENTS, INCLUDING THE OLYMPIC S, DAVIS CUP AND FED CUP, AND THE USTA PRO CIRCUIT TOGETHER, THEY MANAGE THE GAME AT THE HIGHEST LEVELS IN THE UNITED STATES. WITH AN EYE TOWARD PROVIDING A MANAGEABLE PATHWAY TO THE ELITE LEVELS OF TENNIS COMPETITION FOR ASPIRING PRO TENNIS PLAYERS AND OFFICIALS THE ACTIVITIES MANAGED BY THE PROFESSIONAL TENNIS OPERATIONS DIVISION REPRESENT TENNIS COMPETITION FOR ATHLETES AT ITS ULTIMATE LEVEL THE EVENTS STAGED BY THE DIVISION ARE LEVERAGED TO SHOWCASE THE FUN, EXCITEMENT, AND ATHLETIC EXCELLENCE OF THE SPORT AND TO ENCOURAGE PARTICIPATION AT ALL LEVELS AS THE RECOGNIZED NATIONAL GOVERNING BODY OF THE SPORT OF TENNIS, THE USTA IS A MEMBER OF THE U S OLYMPIC COMMITTEE THE USTA COORDINATES THE UNITED STATES' TENNIS PARTICIPATION IN THE OLYMPIC GAMES AND THE PARALYMPIC GAMES, AS WELL AS THE PAN-AMERICAN GAMES DAVIS CUP AND FED CUP ARE THE ELITE INTERNATIONAL TEAM COMPETITIONS IN PROFESSIONAL TENNIS FOR MEN AND WOMEN, RESPECTIVELY, WITH MORE THAN 130 NATIONS COMPETING IN THESE EVENTS ANNUALLY THE UNITED STATES HAS WON THE DAVIS CUP CHAMPIONSHIP ON 32 OCCASIONS, MORE THAN ANY OTHER NATION, WHILE THE UNITED STATES FED CUP TEAM HAS WON THE FED CUP TITLE MORE THAN ANY OTHER NATION, A RECORD 18 TIMES THE US OPEN SERIES, WHICH THE USTA LAUNCHED IN 2004, LINKS SEVEN ATP TOUR AND WTA SUMMER HARD-COURT TOURNAMENTS IN NORTH AMERICA TO THE US OPEN THE SERIES MAKES IT EASIER FOR FANS TO CONNECT WITH THE GAME BY FORMING A TRUE REGULAR SEASON OF HARD-COURT TENNIS, WITH ITS COHESIVE SCHEDULE ALLOWING FOR "APPOINTMENT TELEVISION" MEANWHILE, THE USTA PROVIDED SUPPORT IN 2018 (VIA PRIZE MONEY, GRANTS, AND OTHER MEANS) TO THE APPROXIMATELY 100 SANCTIONED PROFESSIONAL TOURNAMENTS THAT COMPRISE THE USTA PRO CIRCUIT, THE WORLD'S LARGEST PROFESSIONAL TOUR FOR TENNIS DEVELOPMENT THE USTA PRO CIRCUIT PROVIDES THE NEXT GENERATION OF AMERICAN CHAMPIONS WITH YEAR-ROUND OPPORTUNITIES TO DEVELOP THEIR GAME AND PLAY AGAINST WORLD-CLASS COMPETITION WITHOUT HAVING TO TRAVEL ABROAD THE USTA'S OFFICIATING DEPARTMENT OVERSEES THE RECRUITMENT, CERTIFICATION, AND EVALUATION OF TENNIS OFFICIALS AT ALL LEVELS OF THE SPORT IN THE UNITED STATES, FROM GRASS-ROOTS TOURNAMENTS TO THE UPPER ECHELONS OF PROFESSIONAL TENNIS BY TRAINING AND CERTIFYING QUALITY OFFICIALS WHO KNOW THE RULES AND REGULATIONS FOR THEIR ON-COURT AND OFF-COURT TOURNAMENT RESPONSIBILITIES, THE USTA SEEKS TO ENSURE SMOOTH-RUNNING TOURNAMENTS WHICH ARE ESSENTIAL TO GROWING THE GAME EACH YEAR, THE USTA CERTIFIES APPROXIMATELY 3,500 TENNIS OFFICIALS, WITH THE MAJORITY OF THEM SERVING IN A VOLUNTEER CAPACITY</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, LINES 6, 7A & 7B	THE VOTING MEMBERS OF THE ASSOCIATION ARE THE SECTIONAL ASSOCIATIONS AND DIRECT MEMBER CLUBS & ORGANIZATIONS WHO HAVE A WEIGHTED VOTE BASED ON ACTUAL MEMBERS IN THEIR GEOGRAPHIC AREA. THE VOTING MEMBERS APPROVE THE SLATE OF OFFICERS AND BOARD MEMBERS AS SUBMITTED BY THE NOMINATING COMMITTEE. IN ADDITION, THEIR RIGHTS INCLUDE APPROVING AMENDMENTS TO THE BY-LAWS AND OTHER VOTING RIGHTS PURSUANT TO NEW YORK STATE NOT-FOR-PROFIT CORPORATION LAW. FORM 990, PART VI, SECTION B, LINE 11B. FORM 990 WAS PREPARED BY A NATIONALLY RENOWNED ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S FINANCIAL DEPARTMENT. THE FORM 990 IS REVIEWED BY USTA'S LEGAL DEPARTMENT, AUDIT COMMITTEE AND IS ALSO DISTRIBUTED TO THE FULL BOARD OF DIRECTORS PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	USTA HAS A CONFLICT OF INTEREST AND DISCLOSURE POLICY THAT APPLIES TO ALL EMPLOYEES, NATIONAL VOLUNTEERS AND BOARD MEMBERS THE CONFLICT OF INTEREST AND DISCLOSURE POLICY REQUIRES AN EMPLOYEE, NATIONAL VOLUNTEER AND BOARD MEMBER TO REPORT INTERESTS OR RELATIONSHIPS THAT COULD PRESENT A POTENTIAL CONFLICT OF INTEREST THE USTA OBTAINS ANNUAL CERTIFICATIONS FROM EMPLOYEES, NATIONAL VOLUNTEERS AND BOARD MEMBERS THE ETHICS OFFICER REVIEWS THE COMPLETED DISCLOSURE STATEMENTS FOR EMPLOYEES AND THE AUDIT COMMITTEE REVIEWS THE COMPLETED DISCLOSURE STATEMENTS FOR THE VOLUNTEERS AT THE NATIONAL GOVERNING BODY LEVEL AND BOARD MEMBERS THE ETHICS OFFICER AND THE CHAIR OF THE AUDIT COMMITTEE HAVE THE DISCRETION TO SHARE THE DISCLOSURE STATEMENTS WITH THE BOARD OF DIRECTORS AND/OR THE EXECUTIVE DIRECTOR & CHIEF OPERATING OFFICER THE ETHICS OFFICER AND THE AUDIT COMMITTEE DETERMINE WHETHER A CONFLICT EXISTS AND SO MARK THEIR DECISION ON THE DISCLOSURE STATEMENT, ALSO INDICATING THE REQUIRED CORRECTIVE ACTION SHOULD THEY DETERMINE THAT A CONFLICT EXISTS (WHICH MAY INCLUDE, BUT IS NOT LIMITED TO, PROHIBITION IN PARTICIPATING, DELIBERATING AND DECIDING ISSUES AND/OR IN TRANSACTIONS)

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINES 15A AND 15B	THE COMPENSATION COMMITTEE HAS RESPONSIBILITY FOR ESTABLISHING A COMPENSATION STRATEGY AND SETTING THE COMPENSATION OF THE EXECUTIVE DIRECTOR, HIS/HER DIRECT REPORTS, AND ANY OTHER HIGHLY COMPENSATED INDIVIDUALS DESIGNATED BY THE COMPENSATION COMMITTEE, PART OF WHICH INCLUDES THE EXECUTIVE DIRECTOR AND CHIEF EXECUTIVE OFFICER, CHIEF ADMINISTRATIVE OFFICER AND GENERAL COUNSEL, THE CHIEF FINANCIAL OFFICER, CHIEF EXECUTIVE, PRO TENIS, CHIEF EXECUTIVE, COMMUNITY TENNIS, CHIEF EXECUTIVE, USTA NATIONAL CAMPUS, CHIEF REVENUE OFFICER, CHIEF MARKETING OFFICER, CHIEF PROFESSIONAL TENNIS OFFICER, US OPEN TOURNAMENT DIRECTOR, AND CHIEF DIVERSITY AND INCLUSION OFFICER THE COMPENSATION COMMITTEE MEETS A MINIMUM OF FOUR TIMES PER YEAR AND CONTEMPORANEOUSLY MAINTAINS MINUTES OF ITS MEETINGS COMPENSATION AND INCENTIVE PLAN LEVELS ARE SET BY THE COMMITTEE FOLLOWING REVIEW OF APPROPRIATE COMPARABILITY DATA APPROPRIATE COMPARABILITY DATA INCLUDES, BUT IS NOT LIMITED TO, (I) INFORMATION REGARDING COMPENSATION PAID BY SIMILAR ORGANIZATIONS FOR SIMILAR SERVICES, (II) THE AVAILABILITY OF SIMILAR SERVICES IN THE ORGANIZATION'S GEOGRAPHIC AREA, AND (III) COMPENSATION SURVEYS COMPILED BY INDEPENDENT FIRMS THE REVIEW DESCRIBED ABOVE WAS CONDUCTED, WITH RESPECT TO COMPENSATION FOR THE ABOVE-NOTED INDIVIDUALS, IN 2018

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ASSOCIATION PROVIDES COPIES OF THE FORM 990 AND ITS FINANCIAL STATEMENTS TO THE PUBLIC UPON REQUEST THE ASSOCIATIONS BYLAWS ARE LOCATED ON ITS WEBSITE (USTA.COM) LASTLY, THE CONFLICT OF INTEREST POLICY CAN BE FOUND ONLINE AT WWW.ETHICSPPOINT.COM UNDER THE WEBSITE DESIGNATED FOR THE ASSOCIATION AND IS ALSO AVAILABLE UPON REQUEST FROM THE ASSOCIATION'S LEGAL DEPARTMENT

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	USTA OWNS A 93.8% INTEREST IN Cincinnati Tennis, LLC ("CINCY") Cincy was organized to operate the Western and Southern Financial Group Masters tournaments. In March 2009, Cincy acquired TCI Ventures LLC to obtain the ATP Tour, Inc. (ATP) World Tour Sanction (Sanction) for the Masters Tournament. FOR 2018, THE INCREASE IN USTA'S CONTROLLING INTEREST TOTALED \$5,988,025.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2018

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) US OPEN SERIES LLC 70 W Red Oak Lane White Plains, NY 10604 20-0984914	Tennis	DE	1,019,990	149,664	USTA
(2) TENNIS RENDEZVOUS LLC 70 W Red Oak Lane White Plains, NY 10604 46-5566771	Tennis	DE			USTA

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) USTA NATIONAL TENNIS CENTER INC 70 W Red Oak Lane White Plains, NY 10604 13-2946690	Tennis	NY	501(c)(3)	10	USTA		No
(2) USTA FOUNDATION INC 70 W Red Oak Lane White Plains, NY 10604 13-3782331	Grant Giving	NY	501(c)(3)	7	USTA		No
(3) USTA PLAYER DEVELOPMENT INC 70 W Red Oak Lane White Plains, NY 10604 27-1368195	Youth Develop	NY	501(c)(3)	12a	USTA		No

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) Cincinnati Tennis 70 W Red Oak Lane White Plains, NY 10604 26-4273680	Tennis Tournament	DE	USTA					No				93.800 %

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b Gift, grant, or capital contribution to related organization(s)	Yes	
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)	Yes	
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)	Yes	
l Performance of services or membership or fundraising solicitations for related organization(s)		No
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o Sharing of paid employees with related organization(s)	Yes	
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
PART V	LINE 1N - PURSUANT TO THE USTA NATIONAL TENNIS CENTER INC ("NTC") CERTIFICATE OF INCORPORATION, CITY OF NEW YORK LEASE AND US OPEN AGREEMENT, NTC MAKES THE FACILITY AVAILABLE TO USTA FOR HOLDING THE US OPEN UNDER THE OPEN AGREEMENT, NTC HAS THE RIGHT TO COLLECT TICKET AND OTHER US OPEN RELATED REVENUE LINE 1O - EXECUTIVE AND ADMINISTRATIVE STAFF OF USTA PROVIDE ASSISTANCE TO THE USTA NATIONAL TENNIS CENTER INC AT NO CHARGE LINE 1O - EXECUTIVE AND ADMINISTRATIVE STAFF OF THE USTA PROVIDE ASSISTANCE TO USTA PLAYER DEVELOPMENT INC AT NO CHARGE

Schedule Form 2016

Additional Data**Software ID:****Software Version:****EIN:** 13-5459420**Name:** UNITED STATES TENNIS ASSOCIATION INCORPORATED**Form 990, Schedule R, Part V - Transactions With Related Organizations**

	(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1)	USTA PLAYER DEVELOPMENT INCORPORATED	B	19,578,474	CASH
(1)	CINCINNATI TENNIS LLC	D	5,327,795	COST
(2)	USTA NATIONAL TENNIS CENTER INC	K	1,833,028	CASH
(3)	USTA FOUNDATION INCORPORATED	N	301,051	FMV
(4)	USTA FOUNDATION INCORPORATED	O	2,092,575	FMV
(5)	USTA FOUNDATION INCORPORATED	B	529,443	CASH
(6)	USTA FOUNDATION INCORPORATED	Q	733,025	CASH
(7)	USTA PLAYER DEVELOPMENT INC	N	1,117,213	COST
(8)	NAT'L TENNIS CENTER INC - SEE PART VII	N/O		
(9)	USTA PLAYER DEVELOPMENT INC - SEE PART VII	O		