### **Return of Organization Exempt From Income Tax**

Department of the Treasury Internal Revenue Service

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.

Inspection

OMB No. 1545-0047

A FO	rtne	e zuzz caie	endar year, or tax year beginning		and en	aing		<del></del>	D Em	plovor	identification number
<b>B</b> Che	ck if a	pplicable:	C Name of organization	3.000.001.001.00	11000000000				D EM	pioyer	identification number
77			UNITED STATES TENNIS	ASSOCIATION I	NCORPORATE	שנ			1 2		-0.4.0.0
		ss change	Doing business as  Number and street (or P.O. box if ma	ail is not delivered to street	addrace)	De	oom/sui	ito			59420 e number
$\vdash$		change	,		address)	I NO		ile			
$\vdash$	nitial r	eturn eturn/terminated	2500 WESTCHESTER AVEN		4-1 d-		411				596-7000
$\vdash$			City or town, state or province, coun	ntry, and ZIP or foreign pos	tai code				<b>G</b> Gro		eipts \$
		led return	PURCHASE, NY 10577								514,400,107.
<i>'</i>	Арриса	ation pending	F Name and address of principal office	er: MICHAEL MCN	ULTY III			H(a) Is this subord	a group dinates?	return fo	Yes X N
			2500 WESTCHESTER AVE		CHASE, NY	10577		H(b) Are al			
I Ta	ax-ex	empt status:	501(c)(3) X 501(c) ( 6	) (insert no.)	4947(a)(1) or	527	7	If "	'No," at	tach a l	ist. See instructions.
	ebsi		WW.USTA.COM					H(c) Group	exem	ption nu	ımber
K F	orm (	of organization	on: X Corporation Trust	Association Other		L Year of	f format	ion: 1973	3 <b>M</b> :	State	of legal domicile: NY
Par	't l	Summ	ary								
	1	Briefly des	scribe the organization's mission of	r most significant activit	ies: TO PRO	MOTE AI	ND DI	EVELOP	THI	E GF	ROWTH OF
9		TENNIS	S AS A MEANS OF HEALTH	FUL RECREATION	N AND PHYS	ICAL F	ITNE	SS.			
Jan											
Ver	2	Check this	s box if the organization of	discontinued its oper	ations or dispo	sed of m	nore t	han 25%	of	its n	et assets.
Governance	3	Number of	f voting members of the governing	body (Part VI, line 1a)						3	15
∞ ∞	4		f independent voting members of t							4	14
Activities &	5		ber of individuals employed in cale							5	940
ξ	6		ber of volunteers (estimate if necess							6	500
Ac			elated business revenue from Part V							7a	317,880
			ated business taxable income from I							7b	86,772
			Nou suomood tanasio moomo nom			<u> </u>	<u> </u>	Prior Ye			Current Year
	8	Contribution	ons and grants (Part VIII, line 1h)			13,594		39	15,684,000		
Revenue	9		service revenue (Part VIII, line 2g)		COPY FOR PUBLIC INSPE		<u> </u>	305,605	-		355,207,449
N Kel	0		nt income (Part VIII, column (A), line			-	-	13,932			225,627,123
	11		enue (Part VIII, column (A), lines 5,								
							<u></u>	1,712			2,570,221
	2		nue - add lines 8 through 11 (must	•			3	34,845			599,088,793
	3		d similar amounts paid (Part IX, colu	66,246		ONE	72,846,778				
	4	Benefits paid to or for members (Part IX, column (A), line 4)  Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  54,									NON
Ses	5			54,734,285.			59,934,791				
Expenses			nal fundraising fees (Part IX, column						NO	ONE	NON
X			draising expenses (Part IX, column (I	· · · —							
	17		enses (Part IX, column (A), lines 11					54,006			180,929,881
	8		enses. Add lines 13-17 (must equal				2	274,986			313,711,450
	9	Revenue I	less expenses. Subtract line 18 from	n line 12				59,858			285,377,343
is o								ning of Cui			End of Year
sset	20		ets (Part X, line 16)				4	185,229	9,56	51.	689,762,874
* 5	21	Total liabil	lities (Part X, line 26)					15,825			50,706,786
	22		s or fund balances. Subtract line 21	from line 20			] 3	369,404	4,46	0.	639,056,088
Par	t II	Signat	ture Block								
Unde	r per	nalties of pe	rjury, I declare that I have examined this plete. Declaration of preparer (other than	is return, including accom	npanying schedules	and statem	nents, a	and to the b	oest of	my k	nowledge and belief, it is
1100,		ot, and com	pioto. Beolaration of proparor (other than	Tomoory to bacca on all in	ionnation of which	proparor ria	o arry iti	Townoago.			
0:											
Sign		Signature of	of officer					Date	Э		
Here	•										
	Ī	Type or prir	nt name and title								
		Print/Type	Date		Check	k	if P	TIN			
Paid		PAUL	HAMMERSCHMIDT	PAUL HAMMERS	CHMIDT	11/11	/202		mploy	ed 1	201384178
Prepa		Firm's nam				<u>-</u>		Firm's EIN			3-5381590
Use C	nly	Firm's add		TH FLOOR NEW YORK. N	TY 10166			Phone no.			L2-885-8000
Mav	the		uss this return with the preparer								. X Yes No
			uction Act Notice, see the separat			<del></del>		• •			Form <b>990</b> (2022

Page 2 Form 990 (2022)

Pa	Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III
	Briefly describe the organization's mission:  SEE SCHEDULE O
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes," describe these new services on Schedule O.
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O.  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 \$including grants of \$) (Revenue \$)  US OPEN - SEE SCHEDULE O)
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)  COMMUNITY TENNIS DEVELOPMENT - SEE SCHEDULE O
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
	PROFESSIONAL TENNIS OPERATIONS DIVISION - SEE SCHEDULE O
4 .	Other present comings (Passeille as Calestula O.)
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses

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2E1020 1.000

Form **990** (2022)

Form 990 (2022)

Part IV Page 3

Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	_		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	.		
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	.		
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	, ,		3.7
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	, ,		3.7
20 -	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		-
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	,	v	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Χ	

Form 990 (2022)
Page 4

Checklist of Required Schedules (continued)

rai	Checklist of Required Schedules (Continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	23	v	
24.5	employees? If "Yes," complete Schedule J	23	X	
24 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		v
27	controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	26		X
21	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
20	"Yes," complete Schedule L, Part IV	28c		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		X
30	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes,"	<u> </u>		
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	256		
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		
30	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	- 30		
•	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? <b>Note</b> : All Form 990 filers are required to complete Schedule O	38	X	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			
4	Enter the number reported in box 2 of Form 1006. Enter 0 if not emplicable		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
C	reportable gaming (gambling) winnings to prize winners?	1c	Х	

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Page 5 Form 990 (2022)

	330 (2022)			age •				
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No				
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 2a 940							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	X					
4a	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)?.							
b	If "Yes," enter the name of the foreign country							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х				
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с						
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?	6a		Х				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or							
	gifts were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods							
	and services provided to the payor?	7a						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was							
	required to file Form 8282?	7c						
d	If "Yes," indicate the number of Forms 8282 filed during the year							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7g						
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h						
8	, , ,							
•	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.	9a						
a	Did the sponsoring organization make any taxable distributions under section 4966?	9b						
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	30						
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12							
	Initiation fees and capital contributions included on Part VIII, line 12							
11	Section 501(c)(12) organizations. Enter:							
	Gross income from members or shareholders							
	Gross income from other sources. (Do not net amounts due or paid to other sources							
	against amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note: See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which							
	the organization is licensed to issue qualified health plans							
С	Enter the amount of reserves on hand							
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or							
	excess parachute payment(s) during the year?	15	Х					
	If "Yes," see the instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X				
	If "Yes," complete Form 4720, Schedule O.							
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities							
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?  If "Yes " complete Form 6069	17						

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

Sect	ion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	15			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar					
b	committee, explain on Schedule O.  Enter the number of voting members included on line 1a, above, who are independent	1b	14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business re		ship with			
	any other officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or un		he direct			
	supervision of officers, directors, trustees, or key employees to a management company or other	persor	1?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was f	iled?.		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's	assets	?	5		X
6	Did the organization have members or stockholders?			6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to e	lect o	r appoint			
	one or more members of the governing body?			7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval			76	37	
_	stockholders, or persons other than the governing body?			7b	X	
8	Did the organization contemporaneously document the meetings held or written actions und	ertake	n during			
_	the year by the following:			8a	Х	
a b	The governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot					
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.			9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Inte	ernal	Revenue	Code	.)	
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of	such	chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt p	urpose	es?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before f	iling th	e form? .	11a	X	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			12a	Х	
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Λ	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests	that c	ould give	12b	Х	
С	rise to conflicts?	oliov?	If "Voc."		- 25	
C	describe on Schedule O how this was done	•		12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review ar					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation		-			
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar		_	100		37
_	with a taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to					
	organization's exempt status with respect to such arrangements?			16b		
Secti	on C. Disclosure	<u> </u>		100		
17	List the states with which a copy of this Form 990 is required to be filedCA,FL,					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable)	990	and 990-T	(sect	ion 5	01(c)
. •	(3)s only) available for <u>public</u> inspection. Indicate <u>how</u> you made these available. Check all that ap		J 000 1	,5500		J . (U)
	Own website Another's website X Upon request Other (explain on Sc		e O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing docur	nents,	conflict o	f inter	est p	olicy,
	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			S		
	USTA ACCOUNTING DEPT, 2500 WESTCHESTER AVENUE, #411 PURCHASE, NY 1	L0577	7			

914-696-7000

Form **990** (2022)

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below	box,	unle	Pos heck ss pe	erson	e than construction is both confirmation of the state of	an	(D)  Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
	dotted line)	Istee	trustee		Ö	pensated				
(1) LEWIS SHERR (SEE SCH. O)	30.00									
CEO & EXECUTIVE DIRECTOR	15.00			X				1,287,827.	NONE	59,024.
(2) ANDREA HIRSCH (SEE SCH. O)	40.00							2720770271	110112	35,021
COO & GENERAL COUNSEL	NONE			X				1,222,515.	NONE	36,377.
(3) STACEY MILKOVICH	40.00									55,511
CHIEF EXECUTIVE, PRO TENNIS	NONE				X			958,075.	NONE	61,874.
(4) EDWARD NEPPL	40.00							,		
CHIEF FINANCIAL OFFICER	NONE	1		Х				863,972.	NONE	54,010.
(5) CRAIG MORRIS	40.00									
CHIEF EXEC., COMM TENNIS&YOUTH	NONE				X			745,725.	NONE	52,724.
(6) AMY WESLY	40.00									
CHIEF BRAND OFFICER	NONE					Х		713,941.	NONE	65,847.
(7) MARTIN BLACKMAN	NONE									
GENERAL MANAGER	40.00					Х		677,385.	NONE	64,070.
(8) MICHAEL DOWSE (THRU 3/22)	30.00									
EXEC. DIRECTOR & CEO	15.00			Х				643,667.	NONE	33,897.
(9) PAUL MAYA	40.00									
CHIEF TECHNOLOGY OFFICER	NONE					Х		594,537.	NONE	61,874.
(10) KRISTEN CORIO	40.00									
CHIEF COMMERCIAL OFFICER	NONE				Х			497,662.	NONE	61,754.
(11) MARISA GRIMES	40.00									
CHIEF DIVERSITY & INCLUS. OFF.	NONE					Х		476,129.	NONE	60,064.
(12) CRAIG ISAACS	40.00									
GENERAL COUNSEL	NONE					Х		475,334.	NONE	55,360.
(13) MICHAEL MCNULTY III	19.00									
CHAIRMAN & PRESIDENT	5.00	Х		Х				35,000.	NONE	NONE
(14) BRIAN HAINLINE	10.00									
FIRST VICE PRESIDENT	7.00	X		Х				25,000.	NONE	NONE

Form **990** (2022)

Page 8 Form 990 (2022)

Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo	ye	es,	and F	lig	hest Compensat	ted Employees (continued)				
(A)	(B)			(0	C)			(D)	(E)	(F)			
Name and title	Average			Pos	sition			Reportable	Reportable	Estimated			
	hours per							compensation	compensation from	amount of			
	week (list any hours for					is both tor/trust		from	related	other compensation			
	related							the organization	organizations (W-2/1099-MISC)	from the			
	organizations	divi	stit.	Officer	y e	ghe	Former	(W-2/1099-MISC)	(**-2/1033-101100)	organization			
	below dotted	Individual trustee or director	Institutional trustee	_	Key employee	st co	"	(** =/ *********************************		and related			
	line)	r trus	al tr		уее	duc				organizations			
		tee	uste			ens							
			ĕ			Highest compensated employee							
15) VANIA KING	5.00												
DIRECTOR	3.00	Х						21,000.	NONE	NONE			
16) LAURA F. CANFIELD	9.00												
VICE PRESIDENT	4.00	X		Х				20,000.	NONE	NONE			
( 17) VIOLET CLARK	9.00												
VICE PRESIDENT	7.00	Х		Х				20,000.	NONE	NONE			
18) BRIAN VAHALY	9.00												
SECRETARY & TREASURER	4.00	Х		Х				20,000.	NONE	NONE			
19) MEGAN MOULTON-LEVY	5.00												
DIRECTOR	3.00	Х						15,500.	NONE	NONE			
20) JEFFREY BAILL	5.00												
DIRECTOR	3.00	Х						10,000.	NONE	NONE			
( 21) KATHLEEN FRANCIS	5.00	1											
DIRECTOR	3.00	X						10,000.	NONE	NONE			
22) PATRICK GALBRAITH	5.00												
IMMEDIATE PAST PRESIDENT	3.00	X						10,000.	NONE	NONE			
23) LIEZEL HUBER	5.00												
DIRECTOR	3.00	X						10,000.	NONE	NONE			
24) ALAN OSTFIELD	5.00	-											
DIRECTOR	3.00	X						10,000.	NONE	NONE			
25) EMILY S. SCHAEFER	5.00	-											
DIRECTOR	3.00							10,000.	NONE				
1b Sub-total								9,373,269.	NONE	666,875.			
c Total from continuation sheets to Part VII, S							<b>&gt;</b>	10,000.	NONE				
d Total (add lines 1b and 1c)								9,383,269.	NONE	666,875.			
2 Total number of individuals (including but not		hose	liste	d al		,	re	ceived more than	\$100,000 of				
reportable compensation from the organization	n ▶				1	78							
										Yes No			
3 Did the organization list any former office													
employee on line 1a? If "Yes," complete Sched	ule J for su	ch ind	Iividu	ual						3			

3	Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated		
	employee on line 1a? If "Yes," complete Schedule J for such individual	3	
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	4	

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

3	
4	
5	

#### **Section B. Independent Contractors**

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

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

	STATES T	ENNI	S	ASS	SOC	IATI	ON	INCORPORATEI	13-545	_
Form 990 (2022)  Part VII Section A. Officers, Directors, Tru	istees Ke	v Fm	nlo	Vec	26 :	and F	lial	hest Compensat	ed Employees	Page 8
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do r	not ch	Pos neck ss pe	ition more	e than of the street than or/trust et highest compensated	ne an	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation fron related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation
26) KURT ZUMWALT DIRECTOR 27) J. CHRISTOPHER LEWIS DIRECTOR	5.00 6.00 5.00 3.00	X						10,000. NONE	NON	
1b Sub-total  c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)  Total number of individuals (including but not	<u> </u>							coived more than	\$100,000 of	
Total number of individuals (including but not reportable compensation from the organization.)      Did the organization list any former office employee on line 1a? If "Yes," complete Scheduler.	n ▶ er, directo	or, or	tru	ıste	e, I	key e	emp	loyee, or highes	t compensated	Yes No
<ul> <li>4 For any individual listed on line 1a, is the sorganization and related organizations graindividual.</li> <li>5 Did any person listed on line 1a receive or for services rendered to the organization? If "You have been also been</li></ul>	eater than accrue co	\$15 mpen	0,0	00? on f	from	"Yes n any	uni	complete Schedu	le J for such	4 X 5 X
Complete this table for your five highest compensation from the organization. Report of year.	pensated i	ndepe	ende	ent o	conf	racto	rs tl	hat received more	than \$100,000	
SEE SCHEDULE O Name and business add	dress							(B) Description of se	ervices	(C) Compensation

JSA 2E1055 1.000

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 128

### Part VIII Statement of Revenue

		Check if Schedule O contains a respo	nse or note to an	y line in this Part V	TII		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts,	1a	Federated campaigns 1a					
Grant	b	Membership dues 1b	15,684,000.				
	С	Fundraising events 1c					
fts, Ir A	d	Related organizations 1d					
Contributions, Gifts, Grants, and Other Similar Amounts	е	Government grants (contributions) 1e					
	f	All other contributions, gifts, grants,					
er i		and similar amounts not included above . 1f					
ib K	g	Noncash contributions included in					
d			\$				
ရှ လ	h	Total. Add lines 1a-1f		15,684,000.			
			Business Code				
Se	2a	TOURNAMENT RELATED	713940	354,599,838.	354,599,838.		
Program Service Revenue	b	TENNIS PROGRAM FEES	713940	500,004.	500,004.		
Su	C	BALL TEST FEES	713940	107,607.	107,607.		
ameve	d						
Pg.	e						
Pr	f	All other program service revenue					
	g	Total. Add lines 2a-2f		355,207,449.			
	3	Investment income (including dividends,					
		other similar amounts)		1,920,239.		-19,733.	1,939,972.
	4	Income from investment of tax-exempt bond		NONE			
	5	Royalties	•	2,232,608.			2,232,608.
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c NON	E NONE				
	d	Net rental income or (loss)		NONE			
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory <b>7a</b> 4,661,746	. 234,356,452.				
<u>a</u>	b	Less: cost or other basis					
evenue		and sales expenses <b>7b</b> 1,835,206	. 13,476,108.				
ě	С	Gain or (loss) 7c 2,826,540	. 220,880,344.				
Ē.	d	Net gain or (loss)		223,706,884.			223,706,884.
Other	8a	Gross income from fundraising					
Ò		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a	NONE				
	b	Less: direct expenses 8b	NONE				
	С	Net income or (loss) from fundraising events		NONE			
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	NONE				
	b	Less: direct expenses 9b	NONE				
	С	Net income or (loss) from gaming activities		NONE			
	10a	Gross sales of inventory, less					
		returns and allowances 10a	NONE				
	b	Less: cost of goods sold	NONE				
	С	Net income or (loss) from sales of inventory.		NONE			
S			Business Code				
eor Pe	11a	ADVERTISING	541800	337,613.		337,613.	
lan	b						
Miscellaneous Revenue	С						
Alis	d	All other revenue					
	е	Total. Add lines 11a-11d		337,613.			
	12	Total revenue. See instructions		599,088,793.	355,207,449.	317,880.	227,879,464.

13-5459420

### Part IX Statement of Functional Expenses

	organizations must complete all columi	All	- 4   / / / /
Section SULLICITAL AND SULLICITAL	organizations must complete all collim	ne. All otner organizatione milet con	INIETE COILIMN I A I

	Check if Schedule O contains a response or note to any line in this Part IX								
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to domestic organizations								
-	and domestic governments. See Part IV, line 21	72,683,413.							
2	Grants and other assistance to domestic								
-	individuals. See Part IV, line 22	163,365.							
3	Grants and other assistance to foreign								
·	organizations, foreign governments, and								
	foreign individuals. See Part IV, lines 15 and 16	NONE							
4	Benefits paid to or for members	NONE							
	Compensation of current officers, directors,								
	trustees, and key employees	6,805,603.							
6	Compensation not included above to disqualified								
Ĭ	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)	NONE							
7	Other salaries and wages	43,077,036.							
	Pension plan accruals and contributions (include	1,816,326.							
-	section 401(k) and 403(b) employer contributions)								
9	Other employee benefits	5,243,816.							
10	Payroll taxes	2,992,010.							
	Fees for services (nonemployees):								
	Management	NONE							
	Legal	880,211.							
	Accounting	302,500.							
	Lobbying	NONE							
	Professional fundraising services. See Part IV, line 17.	NONE							
f	Investment management fees	427,888.							
g	Other. (If line 11g amount exceeds 10% of line 25, column								
	(A), amount, list line 11g expenses on Schedule O.)	16,789,781.							
12	Advertising and promotion	2,883,865.							
13	Office expenses	1,764,879.							
14	Information technology	12,309,536.							
15	Royalties	NONE							
16	Occupancy	4,041,849.							
17	Travel	14,445,426.							
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials	NONE							
19	Conferences, conventions, and meetings	413,632.							
20		NONE							
21	Payments to affiliates	NONE							
22	Depreciation, depletion, and amortization	13,138,720.							
23		4,410,999.							
24									
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column								
	(A), amount, list line 24e expenses on Schedule O.)								
_	EVENT/PLAYER COMPENSATION	62,160,562.							
a	TENNIS EVENT PRODUCTIONS	15,168,554.							
o o	MEMBERSHIP CALL CENTER EXP	2,706,912.							
4	PRINTING & PUBLICATIONS	1,656,300.							
u e	All other expenses	27,428,267.							
	Total functional expenses. Add lines 1 through 24e	313,711,450.							
	Joint costs. Complete this line only if the	323 / 122 / 130 .							
	organization reported in column (B) joint costs from a combined educational campaign and								
	fundraising solicitation. Check here								
	following SOP 98-2 (ASC 958-720)								

Form 990 (2022)

Page **11** 

### Part X Balance Sheet

	art A	Check if Schedule O contains a response or note to any line in this Pa	art X		
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	1,472,451.	1	295,695.
	2	Savings and temporary cash investments	135,709,322.	2	343,559,778.
	3	Pledges and grants receivable, net	NONE	3	NONE
	4	Accounts receivable, net	140,858,266.	4	136,473,479.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	NONE	5	NONE
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	NONE	6	NONE
ts	7	Notes and loans receivable, net	2,931,478.	7	NONE
Assets	8	Inventories for sale or use	953,462.	8	1,683,355.
Ä	9	Prepaid expenses and deferred charges	8,819,530.	9	8,742,739.
	10 a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 148,834,516.			
	b	Less: accumulated depreciation 10b 84,251,404.	68,332,657.	10c	64,583,112.
	11	Investments - publicly traded securities	432,496.	11	28,323,641.
	12	Investments - other securities. See Part IV, line 11	95,378,198.	12	98,890,647.
	13	Investments - program-related. See Part IV, line 11.	29,791,002.	13	6,516,602.
	14	Intangible assets	NONE	14	NONE
	15	Other assets. See Part IV, line 11	550,699.	15	693,826.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	485,229,561.	16	689,762,874.
	17	Accounts payable and accrued expenses	26,168,518.	17	27,391,050.
	18	Grants payable	NONE	18	NONE
	19	Deferred revenue	28,468,940.	19	21,670,577.
	20	Tax-exempt bond liabilities	NONE	20	NONE
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	NONE	21	NONE
S	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
abi		controlled entity or family member of any of these persons	NONE	22	NONE
Ξ	23	Secured mortgages and notes payable to unrelated third parties	60,000,000.	23	NONE
	24	Unsecured notes and loans payable to unrelated third parties	NONE	24	NONE
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	1,187,643.	25	1,645,159.
	26	Total liabilities. Add lines 17 through 25	115,825,101.	26	50,706,786.
seo		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
<u>la</u>	27	Net assets without donor restrictions	369,404,460.	27	639,056,088.
å	28	Net assets with donor restrictions	NONE		NONE
<b>Fund Balances</b>		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.	-		
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Assets	31	Retained earnings, endowment, accumulated income, or other funds		31	
ž.	32	Total net assets or fund balances	369,404,460.	32	639,056,088.
Net	33	Total liabilities and net assets/fund balances	485,229,561.	33	689,762,874.
_	00		100,220,301.	55	Form <b>990</b> (2022)

Form **990** (2022)

Form 990 (2022) Page **12** 

Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					. X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	59	9,0	88,	<u> 793</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	31	3,7	11,	<u>450</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	28	<u>5,3</u>	77,	<u>343</u> .
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	36	9,4	04,	<u>460</u>
5	Net unrealized gains (losses) on investments	5	-1	5 <i>,</i> 7	25,	<u>718</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				<u> </u>
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	63	9,0	56,	<u>880</u>
Part	·					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	on			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .			2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled	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?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed or	n a			
	separate basis, consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ove	rsight	of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant	nt?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain	on			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in t	the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ergo	the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	dits .		3b		

### **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. **Open to Public** Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information. If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(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.

Tax)	(See separate instructions), the		Tax) (See separate in	nstructions) or Form 990-I	EZ, Part V, line 35c (Prox
	Section 501(c)(4), (5), or (6) organization	anizations: Complete Part III.		Empleyer ide	ntification number
	•			' '	
	TED STATES TENNIS AS	SSOCIATION INCORPORATED			459420
		organization is exempt under			
1	•	ne organization's direct and indi	rect political camp	aign activities in Part	IV. See instructions for
	definition of "political campa	_			
2		xpenditures. See instructions			
	Volunteer hours for political	campaign activities. See instruction	ns		
Par		organization is exempt under s			
1		cise tax incurred by the organizatio			
2	Enter the amount of any exc	cise tax incurred by organization m	anagers under secti	on 4955 \$	
3	If the organization incurred a	a section 4955 tax, did it file Form	4720 for this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Par	rt I-C Complete if the c	organization is exempt under	section 501(c), ex	cept section 501(c)(3	).
1		xpended by the filing organization			
2		g organization's funds contributed			
		es			
3		enditures. Add lines 1 and 2. Ent			
5	Enter the names, addresses organization made payment the amount of political cont	e Form 1120-POL for this year? and employer identification numb s. For each organization listed, en ributions received that were prom nd or a political action committee (I	er (EIN) of all section ter the amount paid optly and directly de	on 527 political organiza I from the filing organizalivered to a separate po	ations to which the filing cation's funds. Also ente plitical organization, such
	<b>(a)</b> Name	( <b>b)</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)					

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

Schedule C (Form 990) 2022

Sch	edule C (Form 990) 2022	NNT.I.F.D	STATES	TENNIS ASSOCIA	ATTON INCORE	PORATED 13	-5459420 Page <b>Z</b>
Pa	cart II-A Complete if the org section 501(h)).	anizatio	on is exen	npt under sectior	n 501(c)(3) and	filed Form 5768 (ele	ction under
Α			•	affiliated group (and		ach affiliated group mem	ber's name, address,
В	Check if the filing organiz	ation che	ecked box A	A and "limited contro	ol" provisions app	ly.	
			ying Expend		· · · · · · · · · · · · · · · · · · ·	(a) Filing	(b) Affiliated
	(The term "expendit				)	organization's totals	group totals
1a	Total lobbying expenditures to in	nfluence	public opini	on (grassroots lobb	ying)		
b	Total lobbying expenditures to in	nfluence	a legislative	e body (direct lobbyi	ng)		
С	Total lobbying expenditures (ad	d lines 1	a and 1b) .				
	I Other exempt purpose expendit						
	Total exempt purpose expenditu			·	_		
f	Lobbying nontaxable amount.	Enter the	e amount f	from the following	table in both		
	columns.						
	If the amount on line 1e, column (a	or (b) is:	The lobbying	g nontaxable amount	is:		
	Not over \$500,000		20% of the	amount on line 1e.			
	Over \$500,000 but not over \$1,000			us 15% of the excess			
	Over \$1,000,000 but not over \$1,5			us 10% of the excess			
	Over \$1,500,000 but not over \$17,	000,000		us 5% of the excess of	ver \$1,500,000.		
	Over \$17,000,000	, , 05	\$1,000,000				
_	Grassroots nontaxable amount				_		
	Subtract line 1g from line 1a. If				_		
	Subtract line 1f from line 1c. If z					tion file Form 4700	
J	If there is an amount other th						□ Vac □ Na
	reporting section 4911 tax for the			aging Period Unde			Yes No
	(Some organizations that				` '	ate all of the five colum	ins helow
	(Some organizations tha			te instructions for I	=		ins sciow.
		Lobb	ying Exper	nditures During 4-Ye	ear Averaging Pe	riod	
	Calendar year (or fiscal year beginning in)	(a)	2019	<b>(b)</b> 2020	<b>(c)</b> 2021	(d) 2022	(e) Total
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column (e))						
С	Total lobbying expenditures						
d	Grassroots nontaxable amount						
е	Grassroots ceiling amount (150% of line 2d, column (e))						
f	Grassroots lobbying expenditures						

Schedule C (Form 990) 2022

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)).

<b></b>	Colonial and Section 60 (11).	(;	a)		(b)
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No	An	mount
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)?.  Media advertisements?				
c 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 c	If "Yes," enter the amount of any tax incurred under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	), or s	section	
	501(c)(6).				
				_	Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from till-B Complete if the organization is exempt under section 501(c)(4), section 501				X
га	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No"				e3 is
	answered "Yes."	٠,٠ ر.	J, . u	7 4 111	0,10
1	Dues, assessments and similar amounts from members			1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou				
	political expenses for which the section 527(f) tax was paid).				
а	Current year			2a	
b	Carryover from last year			2b	
С	Total			2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due			3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lo	obbyli	ng	4	
5	and political expenditures next year?			5	
Pa	rt IV Supplemental Information				
Pro	ride the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate	d gro	up lis	t); Part II-A	, lines 1 an
2 (S	ee instructions); and Part II-B, line 1. Also, complete this part for any additional information.				

# 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 instructions and the latest information.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Nam	e of the organization		Employer identification number
UN	TTED STATES TENNIS ASSOCIATION INCOF	PORATED	13-5459420
$\overline{}$	rt I Organizations Maintaining Donor Adv		
	Complete if the organization answered		
		(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		in donor advised
	funds are the organization's property, subject to the	<del>-</del>	
6	Did the organization inform all grantees, donors, a	_	
	only for charitable purposes and not for the bene		
	conferring impermissible private benefit?		Yes No
Pa	rt    Conservation Easements.		
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the	organization (check all that apply).	
	Preservation of land for public use (for example	r, recreation or education) Preservation	of a 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 he	eld a qualified conservation contribution in	
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	5	2b
С	Number of conservation easements on a certified	historic structure included in (a)	2c
d	Number of conservation easements included in (c)		
	a historic structure listed in the National Register.		2d
3	Number of conservation easements modified, tra	nsferred, released, extinguished, or term	ninated by the organization during the
	tax year		
4	Number of states where property subject to conse		
5	Does the organization have a written policy reg		-
	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, insp	ecting, handling of violations, and enforcing	conservation easements during the year
_	<del></del>		
7	Amount of expenses incurred in monitoring, inspec	ting, handling of violations, and enforcing c	conservation easements during the year
_			
8	Does each conservation easement reported on line 2	• •	
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization re		
	balance sheet, and include, if applicable, the text organization's accounting for conservation easeme		nancial statements that describes the
D:	irt III Organizations Maintaining Collections		ar Similar Assets
	Complete if the organization answered		ommar Addets.
10		· · · · · · · · · · · · · · · · · · ·	us statement and balance sheet works
1a	If the organization elected, as permitted under FA of art, historical treasures, or other similar asse	ts 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 t	these items.
b	If the organization elected, as permitted under F		
	art, historical treasures, or other similar assets he provide the following amounts relating to these item		search in furtherance of public service,
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of a		
_	following amounts required to be reported under F		assets for infamicial gain, provide the
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		\$

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

Schedule D (Form 990) 2022

		TED STATES T							5459420 Page <b>2</b>
Pa	rt Ⅲ Organizations Maintaini								
3	Using the organization's acquisition		d other reco	ds, check	any of the	e follow	ing that m	ake sigr	nificant use of its
	collection items (check all that app	y):	. —	٦.					
а	Public exhibition		d		r exchange				
b	Scholarly research		e	_ Other _					
С	Preservation for future gene	rations							
4	Provide a description of the organ	nization's collectio	ns and expl	ain how th	ney further	r the org	ganization's	exemp	t purpose in Part
	XIII.								
5	During the year, did the organization	n solicit or receive	e donations o	of art, histo	rical treas	ures, or o	other simila	ır	
	assets to be sold to raise funds rath	er than to be mai	ntained as pa	art of the o	rganizatior	n's collec	tion?	[	Yes No
Pa	rt IV Escrow and Custodial A	rrangements.	-					<u>,                                     </u>	
	Complete if the organiza		Yes" on For	m 990, P	art IV, line	9, or re	eported ar	n amour	nt on Form
	990, Part X, line 21.								
1a	Is the organization an agent, trus	tee, custodian or	other intern	nediary fo	r contribut	tions or	other asse	ts not	
	included on Form 990, Part X?							[	Yes No
b									
								Amount	
С	Beginning balance				1c				
d	Additions during the year								
е	Distributions during the year								
f	Ending balance								
2a						ustodial	account liah	nility?	Yes No
	If "Yes," explain the arrangement in								
	rt V Endowment Funds.	TT GIT AIII. OHOOK	11010 11 1110 0	Apianation	nao boon p	noviaca (	JITT GIT ZIII		
	Complete if the organiza	tion answered "	Yes" on For	m 990. P	art IV. line	e 10.			
	,	(a) Current year	(b) Prio		(c) Two year		(d) Three ye	ars back	(e) Four years back
4 -	Danimaian of warm halaman	(.,		,	., ,		(-,,-		(4)
1 a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains,								
	and losses								
d	and losses								
d	and losses								
d e	and losses								
d e f	and losses								
d e f	and losses		r end balanc	e (line 1g,	column (a)	) held as:			
d e f g 2	and losses	of the current yea	r end balano	e (line 1g,	column (a))	) held as:			
d e f g 2	and losses	of the current yea		e (line 1g,	column (a))	) held as:			
d e f g 2 a b	and losses	of the current yea ent		e (line 1g,	column (a))	) held as:			
d e f g 2 a b	and losses	of the current yea lent %	- %	e (line 1g,	column (a))	) held as:			
d e f g 2 a b c	and losses	of the current yea lent % % and 2c should equa	- <sup>%</sup> al 100%.					the	
d e f g 2 a b c	and losses	of the current yea lent % % and 2c should equa	- <sup>%</sup> al 100%.					the	Yes No
d e f g 2 a b c	and losses	of the current year lent % and 2c should equate the possession of	_ % al 100%. the organiza	ation that a	are held ar	nd admin	istered for t	the	Yes No
d e f g 2 a b c	and losses	of the current year lent % and 2c should equate the possession of		ation that a	are held ar	nd admin	istered for t	the	
d e f g 2 a b c	and losses	of the current year lent % and 2c should equate the possession of		ation that a	are held ar	nd admin	istered for t	the	3a(i)
d e f g 2 a b c	and losses  Grants or scholarships  Other expenditures for facilities and programs  Administrative expenses  End of year balance  Provide the estimated percentage Board designated or quasi-endown Permanent endowment  Term endowment  The percentages on lines 2a, 2b, a Are there endowment funds not in organization by:  (i) Unrelated organizations  (ii) Related organizations	of the current yearent %  and 2c should equate the possession of	al 100%. the organiza	ation that a	are held an	nd admin	istered for t	the	3a(i) 3a(ii)
d e f g 2 a b c 3a	and losses	of the current year ent %  and 2c should equal the possession of  ed organizations lisuses of the organications.	al 100%. the organiza	ation that a	are held ar	nd admin	istered for t		3a(i) 3a(ii) 3b
d e f g 2 a b c 3a	and losses	of the current year lent %  and 2c should equate the possession of the organizations listses of the organization answered "	al 100%. the organization's endo	ation that a ed on Sche wment fun rm 990, F	are held and the second	nd admin	istered for t	990, Pa	3a(i) 3a(ii) 3b
d e f g 2 a b c 3a	and losses	of the current year lent %  and 2c should equal the possession of ed organizations lisuses of the organi lipment. ation answered "  (a) Cost	al 100%. the organiza	ed on Schewment fun	are held ar	e 11a. S	istered for t	990, Pa	3a(i) 3a(ii) 3b
d e f g 2 a b c 3a b 4 Pa	and losses	of the current year lent %  and 2c should equate the possession of the organizations list is ses of the organization answered "  (a) Cost (inv	al 100%. the organization's endo  Yes" on Foor of ther basis	ed on Schewment fun	are held ar edule R? . ds. Part IV, line r other basis	e 11a. S	istered for t	990, Pa	3a(i) 3a(ii) 3b
d e f g 2 a b c C 3a b 4 Pa	and losses	of the current year lent	al 100%. the organization's endo  Yes" on Foor of ther basis	ed on Schewment fun	are held ar edule R? . ds. Part IV, line r other basis	e 11a. S	istered for t	990, Pa	3a(i) 3a(ii) 3b

64,583,112. Schedule D (Form 990) 2022

20,008,829.

1,069,867.

74,862,023. 54,853,194.

15,185,375

16,255,242.

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

d Equipment......

	TENNIS ASSOCIAT	TION INCORPORATED 13	3-5459420 Page
Part VII Investments - Other Securities.  Complete if the organization answered	d "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 valuat Cost or end-of-year mark	
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) PRIVATE EQUITY	44,281,677.	FMV	
(B) ALTERNATIVE INVESTMENTS	25,400,760.	FMV	
(C) COMMON TRUST & PVT MUTUAL FUND	29,208,210.	FMV	
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	98,890,647.		
Part VIII Investments - Program Related.			
Complete if the organization answered	d "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 valuat Cost or end-of-year mark	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.  Complete if the organization answered		, Part IV, line 11d. See Form 990	
	escription		(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 line 25.	d "Yes" on Form 990	, Part IV, line 11e or 11f. See For	m 990, Part X,
	ation of liability		(h) Pook volue

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)POST RETIREMENT BENEFITS	1,596,159.
(3)LONG TERM SCHOLARSHIPS PAYABLE	49,000.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	1,645,159.

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

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains (losses) on investments	
a b	Donated services and use of facilities	-
	Recoveries of prior year grants	
c d	Other (Describe in Part XIII.)	-
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	
a b	Other (Describe in Part XIII.)	-
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		
	•	1
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	-
b	The year adjustments [1] [1] [1] [1]	-
C	Other losses	-
d	Other (Describe in Part XIII.)	
е	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	-
b	Other (Describe in Part XIII.)	4.5
С 5	Add lines <b>4a</b> and <b>4b</b>	4c 5
	XIII Supplemental Information.	] 3
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; F	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 inform	nation.
SEE	SUPPLEMENTAL PAGE	
-		

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. US OPEN SERIES, LLC ("USOS") IS A SINGLE-MEMBER LIMITED LIABILITY COMPANY (LLC) FOR WHICH THE REPORTING ORGANIZATION IS THE SINGLE MEMBER. USOS IS CONSIDERED TO BE A DISREGARDED ENTITY AND IS NOT RECOGNIZED FOR TAX PURPOSES AS A SEPARATE ENTITY FROM THE REPORTING ORGANIZATION. AS SUCH, ITS INCOME AND EXPENSES ARE REPORTED AS PART OF THE REPORTING ORGANIZATION'S ANNUAL FILINGS. 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 THE REPORTING ORGANIZATION. THE REPORTING ORGANIZATION HAS FILED ALL APPLICABLE RETURNS WHEN REQUIRED. FOR THE YEAR ENDED DECEMBER 31, 2022, 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 IS SUBJECT TO ROUTINE AUDITS BY TAXING AUTHORITIES.

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

OMB No. 1545-0047 2022

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.

**Open to Public** Inspection

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

Name of the organization						Employer identificat	ion number
UNITED STATES TENNIS ASSOCIATION		13-5459420					
Part I General Information on Grants a	and Assistance	е					
<ol> <li>Does the organization maintain records to the selection criteria used to award the gra</li> <li>Describe in Part IV the organization's prod</li> </ol>	ants or assistand cedures for mor	e? nitoring the use	of grant funds in the	e United States.			X Yes No
Part II Grants and Other Assistance to Part IV, line 21, for any recipient		_			additional space is n		es" on Form 990,
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) USTA/SOUTHERN SECTION							
5685 SPALDING DR. NORCROSS, GA 30092	58-1190935	501(C)(4)	12,738,112.				PROGRAM GRANT
(2) USTA/MIDWEST SECTION							
1310 EAST 96TH ST INDIANAPOLIS, IN 46240	23-7417933	501(C)(4)	6,140,307.				PROGRAM GRANT
(3) USTA/TEXAS TENNIS ASSOCIATION							
8105 EXCHANGE DR. AUSTIN, TX 78754	74-2182392	501(C)(4)	4,101,222.				PROGRAM GRANT
(4) USTA/EASTERN							
2500 WESTCHESTER AVENUE PURCHASE, NY 10577	13-5042070	501(C)(4)	3,861,982.				PROGRAM GRANT
(5) USTA/NORTHERN CALIFORNIA							
1920 NORTH LOOP ROAD ALAMEDA, CA 94502	94-1057590	501(C)(3)	3,739,534.				PROGRAM GRANT
(6) USTA/FLORIDA SECTION							
12005 PERFORMANCE DRIVE ORLANDO, FL 32827	23-7161642	501(C)(4)	3,523,755.				PROGRAM GRANT
(7) USTA/SOUTHERN CALIFORNIA							
1642 HARPER AVE REDONDO BEACH, CA 90278	95-1243600	501(C)(3)	3,490,554.				PROGRAM GRANT
(8) USTA/INTERMOUNTAIN TENNIS SECTION							
9145 E. KENYON AVE. DENVER, CO 80237	84-0726651	501(C)(4)	3,374,455.				PROGRAM GRANT
(9) USTA/MID-ATLANTIC SECTION INC.							
620 HERNDON PARKWAY HERNDON, VA 20170	54-1472806	501(C)(3)	2,986,323.				PROGRAM GRANT
(10) USTA/MIDDLE STATES							
PO BOX 987 VALLEY FORGE, PA 19482	23-1688212	501(C)(4)	2,747,075.				PROGRAM GRANT
(11) USA TENNIS NEW ENGLAND							
110 TURNPIKE ROAD WESTBOROUGH, MA 01581	04-6006570	501(C)(4)	2,658,548.				PROGRAM GRANT
(12) USTA/MISSOURI VALLEY SECTION							
4121 W. 83RD ST. PRAIRE VILLAGE, KS 66208	23-7416298	501(C)(4)	2,393,682.				PROGRAM GRANT
2 Enter total number of section 501(c)(3) ar	•	•					68
3 Enter total number of other organizations	listed in the line	1 table	<u> </u>	<u> </u>	<u> </u>	<u></u>	25

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

Schedule I (Form 990) 2022

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

OMB No. 1545-0047
2022

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Comparison

Co

UNITED STATES TENNIS ASSOCIATION INCORPORATED						13-5459420	
Part I General Information on Grants and	d Assistanc	е					
1 Does the organization maintain records to su	ubstantiate th	e amount of the	grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
the selection criteria used to award the grant	s or assistand	e?					Yes No
2 Describe in Part IV the organization's proced	dures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to D	omestic Or	nanizations ar	nd Domestic Gov	vernments Com	nlete if the organiz	ation answered "Y	es" on Form 990
Part IV, line 21, for any recipient the		-					C5 0111 01111 000,
					<u> </u>		T
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) USTA/PACIFIC NORTHWEST							
9746 SW NIMBUS AVE. BEAVERTON, OR 97008	93-0853818	501(C)(3)	2,147,251.				PROGRAM GRANT
(2) USTA/NORTHERN SECTION							
2685 VIKINGS CIRCLE EAGAN, MN 55121	41-1675510	501(C)(3)	1,642,307.				PROGRAM GRANT
(3) USTA/SOUTHWEST SECTION							
7010 E. ACOMA DR #201 SCOTTSDALE, AZ 85254	85-0254477	501(C)(4)	1,500,358.				PROGRAM GRANT
(4) USTA HAWAII PACIFIC, INC.							
1888 KALAKAOA AVE. HONOLULU, HI 96815	83-1926549	501(C)(3)	1,103,625.				PROGRAM GRANT
(5) USTA/CARIBBEAN SECTION							
PO BOX 190740 SAN JUAN, PR 00919	66-0413224	N/A	920,156.				PROGRAM GRANT
(6) TENNIS INDUSTRY ASSOCIATION							
35 E. WACKER DRIVE CHICAGO, IL 60601	51-0162283	501(C)(6)	500,000.				PROGRAM GRANT
(7) USTA FOUNDATION INC.							
2500 WESTCHESTER AVENUE PURCHASE, NY 10577	13-3782331	501(C)(3)	411,443.				PROGRAM GRANT
(8) PTR-PROFESSIONAL TENNIS REGISTRY							
PO BOX 4739 HILTON HEAD, SC 29938	57-0795565	501(C)(6)	190,000.				PROGRAM GRANT
(9) INTERCOLLEGIATE TENNIS ASSOC.							
1130 E UNIVERSITY DRIVE TEMPE, AZ 85281	74-2021178	501(C)(3)	170,000.				PROGRAM GRANT
(10) INTERNATIONAL TENNIS HALL OF FAME							
194 BELLEVUE AVE. NEWPORT, RI 02840	13-6144356	501(C)(3)	76,900.				PROGRAM GRANT
(11) UNITED STATES PROFESSIONAL TENNIS ASSOC INC							
11961 PERFORMANCE DRIVE ORLANDO, FL 32827	74-1818176	501(C)(6)	67,500.				PROGRAM GRANT
(12) DON'T EVER GIVE UP INC.							
14600 WESTON PARKWAY CARY, NC 27513	47-5304184	501(C)(3)	50,000.				PROGRAM GRANT
2 Enter total number of section 501(c)(3) and							
3 Enter total number of other organizations list	ted in the line	1 table					

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

OMB No. 1545-0047
2022

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.

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Open to Public Inspection

Schedule I (Form 990) 2022

Name of the organization						Employer identificat	ion number
UNITED STATES TENNIS ASSOCIATION INCORPORATED						13-5459420	
Part I General Information on Grants a	ınd Assistanc	е					
<ol> <li>Does the organization maintain records to the selection criteria used to award the gra</li> <li>Describe in Part IV the organization's proc</li> <li>Part II Grants and Other Assistance to</li> </ol>	ants or assistand edures for mor	e? nitoring the use	of grant funds in the	e United States.			Yes No
Part IV, line 21, for any recipient		_					C3 0111 01111 030,
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) SIOUX FALLS TENNIS ASSOCIATION							
PO BOX 89512 SIOUX FALLS, SD 57109	36-3916958	501(C)(3)	50,000.				PROGRAM GRANT
(2) PHIT AMERICA							
962 WAYNE AVE. SILVER SPRING, MD 20910	46-1432776	501(C)(4)	50,000.				PROGRAM GRANT
(3) WOODFORD CO FISCAL COURT							
103 SOUTH MAIN ST VERSAILLES, KY 40383	61-6000973	GOVERNMENT	50,000.				PROGRAM GRANT
(4) REGENTS OF THE UNIVERSITY OF MINNESOTA							
NW 5957 PO BOX 1450 MINNEAPOLIS, MN 55485	41-6042488	501(C)(3)	37,819.				PROGRAM GRANT
(5) JUNIOR TENNIS CHAMPIONS CENTER							
5200 CAMPUS DRIVE COLLEGE PARK, MD 20740	52-2114223	501(C)(3)	34,100.				PROGRAM GRANT
(6) DESERT CHAMPIONS LLC							
78-200 MILES AVENUE INDIAN WELLS, CA 92210	33-0810276	N/A	32,000.				PROGRAM GRANT
(7) UNIVERSITY OF IDAHO FOUNDATION INC							
875 PERIMETER DR MOSCOW, ID 83844	23-7098404	501(C)(3)	30,000.				PROGRAM GRANT
(8) THE SCHOOL DISTRICT OF ESCAMBIA COUNTY							
75 NORTH PACE BLVD PENSACOLA, FL 32505	59-6000597	EDUCATIONAL	30,000.				PROGRAM GRANT
(9) GR RACQUET AND FITNESS LLC							
4940 PLAINFIELD AV NE GRAND RAPIDS MI 49525	82-3270939	N/A	30,000.				PROGRAM GRANT
(10) YOUTH TENNIS SAN DIEGO							
4490 W PT LOMA BLVD SAN DIEGO, CA 92107	95-6095644	501(C)(3)	26,000.				PROGRAM GRANT
(11) ACE DEUCE INC.							
3629 WILLOW SPRINGS LEXINGTON, KY 40509	47-1626467	501(C)(3)	25,000.				PROGRAM GRANT
(12) SIDELINE INC							
1530 CROWN POINTE BLVD TUSCALOOSA, AL 35406	27-1432975	501(C)(3)	20,000.				PROGRAM GRANT
2 Enter total number of section 501(c)(3) an	d government	organizations lis	sted in the line 1 tal	ole			
3 Enter total number of other organizations	listed in the line	1 table					

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

OMB No. 1545-0047
2022

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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Schedule I (Form 990) 2022

Employer identification number

UNITED STATES TENNIS ASSOCIATION INCORPORATED						13-5459420	
Part I General Information on Grants a	and Assistanc	е					
1 Does the organization maintain records to	substantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
the selection criteria used to award the gra	ants or assistand	e?					Yes No
2 Describe in Part IV the organization's prod	cedures for mor	nitoring the use	of grant funds in the	e United States.			
Part    Grants and Other Assistance to	Domestic Or	ganizations ar	nd Domestic Gov	vernments. Com	plete if the organiz	ation answered "Y	es" on Form 990.
Part IV, line 21, for any recipien		-					,
1 (a) Name and address of organization	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of	(f) Method of valuation	(g) Description of	(h) Purpose of grant
or government	(b) EIN	(if applicable)	grant	noncash assistance	(book, FMV, appraisal, other)	noncash assistance	or assistance
(1) CITY OF CALHOUN							
PO BOX 248 CALHOUN, GA 30701	58-6000530	GOVERNMENT	20,000.				PROGRAM GRANT
(2) PLAY YOUR COURT LLC							
1024 CATON DR VIRGINIA BEACH, VA 23454	26-4663000	N/A	20,000.				PROGRAM GRANT
(3) THREE ATHLETICS LLC							
200 RUNNING PUMP RD LANCASTER, PA 17603	85-1336530	N/A	20,000.				PROGRAM GRANT
(4) UNIVERSITY OF HOUSTON SYSTEM							
5000 GULF FWY HOUSTON, TX 77204	74-6001399	EDUCATIONAL	18,600.				PROGRAM GRANT
(5) ARTHUR ASHE INSTITUTE FOR URBAN HEALTH							
450 CLARKSON AVENUE BROOKLYN, NY 11203	11-3185372	501(C)(3)	17,872.				PROGRAM GRANT
(6) JKST INC.							
610 S HENDERSON RD KING OF PRUSSIA PA 19406	23-2451825	N/A	17,500.				PROGRAM GRANT
(7) ICAHN SCHOOL PF MEDICINE AT MOUNT SINAI							
ONE GUSTAVEL LEVY PLACE NEW YORK, NY 10029	13-6171197	501(C)(3)	15,000.				PROGRAM GRANT
(8) MARCH OF DIMES							
233 PARK AVENUE SOUTH NEW YORK, NY 10003	13-1846366	501(C)(3)	15,000.				PROGRAM GRANT
(9) WOMEN'S SPORTS FOUNDATION							
247 WEST 30TH STREET NEW YORK, NY 10001	23-7380557	501(C)(3)	15,000.				PROGRAM GRANT
(10) CITY OF DEBARY							
16 COLOMBA RD DEBARY, FL 32713	59-3217634	GOVERNMENT	15,000.				PROGRAM GRANT
(11) CITY OF DENTON							
215 E. MCKINNEY ST DENTON, TX 76201	75-6000514	GOVERNMENT	15,000.				PROGRAM GRANT
(12) CITY OF GLADSTONE							
7010 N HOLMES GLADSTONE, MO 64118	44-6005624	GOVERNMENT	15,000.				PROGRAM GRANT
2 Enter total number of section 501(c)(3) ar	nd government	organizations lis	sted in the line 1 tal	ole			<u> </u>

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

2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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Open to Public Inspection

Schedule I (Form 990) 2022

Name of the organization						Employer identificat	ion number
UNITED STATES TENNIS ASSOCIATION INCORPORATED						13-5459420	
Part I General Information on Grants and	d Assistanc	e					
<ol> <li>Does the organization maintain records to so the selection criteria used to award the grant</li> <li>Describe in Part IV the organization's proced</li> <li>Part II Grants and Other Assistance to D</li> </ol>	s or assistand dures for mor	e? nitoring the use	of grant funds in th	e United States.			Yes No
Part IV, line 21, for any recipient the		_					es on roini 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) HARPER'S RACQUET CLUB LIMITED							
1055 ST. PAUL PLACE CINCINNATI, OH 45202	31-0985920	N/A	15,000.				PROGRAM GRANT
(2) HARLEM JUNIOR TENNIS AND EDUCATION PROGRAM							
40 WEST 143RD STREET NEW YORK, NY 10037	13-3076419	501(C)(3)	12,500.				PROGRAM GRANT
(3) UNIVERSITY OF FLORIDA FOUNDATION INC							
1938 W UNIVERSITY AVE GAINESVILLE, FL 32603	59-0974739	501(C)(3)	12,500.				PROGRAM GRANT
(4) NYJTL							
36-36 33RD ST LONG ISLAND CITY, NY 11106	23-7442256	501(C)(3)	12,000.				PROGRAM GRANT
(5) SOUTHERN CALIFORNIA TENNIS ASSOCIATION FDN.							
4490 W POINT LOMA BLVD SAN DIEGO, CA 92107	95-4112667	501(C)(3)	12,000.				PROGRAM GRANT
(6) PLAYER'S INTERNATIONAL MANAGEMENT INC							
30 NW 1 ST. AVE. DELRAY BEACH, FL 33444	65-0489437	N/A	12,000.				PROGRAM GRANT
(7) CITY OF SURPRISE							
16000 N. CIVIC CTR PLZ SURPRISE, AZ 85374	86-6007796	GOVERNMENT	10,900.				PROGRAM GRANT
(8) ATHLETE ALLY INC							
25 WEST 45TH ST NEW YORK, NY 10036	27-5527156	501(C)(3)	10,000.				PROGRAM GRANT
(9) DREAM COURT, INC.							
3027 CLOVERDALE RD MONTGOMERY, AL 36106	46-3051604	501(C)(3)	10,000.				PROGRAM GRANT
(10) JUNIOR TENNIS FOUNDATION							
2500 WESTCHESTER AVENUE PURCHASE, NY 10577	13-3155380	501(C)(3)	10,000.				PROGRAM GRANT
(11) NEW YORK EDGE INC							
58-12 QUEENS BLVD WOODSIDE, NY 11377	11-3112635	501(C)(3)	10,000.				PROGRAM GRANT
(12) TRUSTEE OF COLUMBIA UNIV. IN THE CITY OF NY							
3030 BROADWAY NEW YORK, NY 10027	13-5598093	501(C)(3)	10,000.				PROGRAM GRANT
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ole			
3 Enter total number of other organizations list	ted in the line	1 table					

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

2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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Employer identification number

UNITED STATES TENNIS ASSOCIATION INCORPORATED						13-5459420	
Part I General Information on Grants a	nd Assistanc	е					
<ol> <li>Does the organization maintain records to the selection criteria used to award the gra</li> <li>Describe in Part IV the organization's process.</li> </ol>	nts or assistand	e?					Yes No
Part II Grants and Other Assistance to Part IV, line 21, for any recipient		_					es" on Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) UNIVERSITY OF THE PACIFIC							
3601 PACIFIC AVE. STOCKTON, CA 95211	94-1156266	501(C)(3)	10,000.				PROGRAM GRANT
(2) HOWELL FARMS COMMUNITY ASSOCIATION, INC.							
1100 NORTH MEADOW PKWY ROSWELL, GA 30076	58-2216875	N/A	9,000.				PROGRAM GRANT
(3) MAINE ADAPTIVE SPORTS & RECREATION							
8 SUNDANCE LANE NEWRY, ME 04261	01-0388818	501(C)(3)	8,350.				PROGRAM GRANT
(4) EARLHAM COLLEGE							
801 NATIONAL RD W RICHMOND, IN 47374	35-0868073	501(C)(3)	8,000.				PROGRAM GRANT
(5) HOFSTRA UNIVERSITY							
128 HOFSTRA UNIVERSITY HEMPSTEAD, NY 11549	11-1630906	501(C)(3)	8,000.				PROGRAM GRANT
(6) LEHMAN COLLEGE							
250 BEDFORD PARK BLVD. WEST BRONX, NY 10468	13-3150922	501(C)(3)	8,000.				PROGRAM GRANT
(7) LOUISIANA STATE UNIVERSITY AND A&M COLLEGE							
OFFICE OF ACCT SVCS BATON ROUGE, LA 70803	72-6000848	501(C)(3)	8,000.				PROGRAM GRANT
(8) MENLO COLLEGE							
1000 EL CAMINO REAL ATHERTON, CA 94027	94-3204136	501(C)(3)	8,000.				PROGRAM GRANT
(9) NORTHERN ARIZONA UNIVERSITY							
601 S KNOLES DR FLAGSTAFF, AZ 86001	74-2579628	501(C)(3)	8,000.				PROGRAM GRANT
(10) STETSON UNIVERSITY							
421 N WOODLAND BLVD DELAND, FL 32723	59-0624416	501(C)(3)	8,000.				PROGRAM GRANT
(11) THE UNIVERSITY OF SOUTHERN MISSISSIPPI							
OFFICE OF FINAN. AID HATTIESBURG, MS 39406	64-6000818	501(C)(3)	8,000.				PROGRAM GRANT
(12) UNIVERSITY OF NEBRASKA BOARD OF REGENTS							
401 CANFIELD ADMIN BLDG LINCOLN, NE 68588	47-0049123	501(C)(3)	8,000.				PROGRAM GRANT
2 Enter total number of section 501(c)(3) and	d government	organizations lis	sted in the line 1 tal	ole			•
3 Enter total number of other organizations li							

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

2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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Schedule I (Form 990) 2022

Name of the organization						Employer identificat	ion number
UNITED STATES TENNIS ASSOCIATION INCORPORATED						13-5459420	
Part I General Information on Grants a	and Assistanc	е				<u>.</u>	
<ol> <li>Does the organization maintain records to the selection criteria used to award the gra</li> <li>Describe in Part IV the organization's prod</li> <li>Part II Grants and Other Assistance to</li> </ol>	ants or assistand cedures for mor	e? nitoring the use	of grant funds in th	e United States.			Yes No
Part IV, line 21, for any recipient	t that received	more than \$5	,000. Part II can	be duplicated if a	additional space is r	needed.	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) UNIVERSITY OF TEXAS AT DALLAS							
800 WEST CAMPBELL RD RICHARDSON, TX 75080	75-1305566	501(C)(3)	8,000.				PROGRAM GRANT
(2) BASC MILL STREET LLC							
PO BOX 6018 BINGHAMTON, NY 13902	88-1276383	N/A	8,000.				PROGRAM GRANT
(3) CENTRAL FLORIDA SPORTS COMMISSION INC							
400 W CHURCH ST ORLANDO, FL 32801	59-3152788	501(C)(3)	7,500.				PROGRAM GRANT
(4) CLEMSON UNIVERSITY							
391 COLLEGE AVE SUITE 302 CLEMSON, SC 29634	57-6000254	501(C)(3)	7,500.				PROGRAM GRANT
(5) WOMEN IN SPORTS AND EVENTS, INC							
244 FIFTH AVENUE NEW YORK, NY 10001	13-4119533	501(C)(3)	7,500.				PROGRAM GRANT
(6) FRANK VELTRI TENNIS CENTER							
9101 NW 2ND ST PLANTATION, FL 33324		EDUCATIONAL	7,500.				PROGRAM GRANT
(7) HIGHLAND PARK TENNIS CLUB							
604 ARDEN DRIVE MONROEVILLE, PA 15146	42-1558515	501(C)(3)	7,500.				PROGRAM GRANT
(8) LEGACY YOUTH TENNIS AND EDUCATION							
4842 RIDGE AVENUE PHILAPELPHIA, PA 19129	23-1747032	501(C)(3)	7,000.				PROGRAM GRANT
(9) SOUTH SHORE YMCA							
79 CODDINGTON STREET QUINCY, MA 02169	04-2105881	501(C)(3)	7,000.				PROGRAM GRANT
(10) THE CLAREMONT CLUB							
1777 MONTE VISTA CLAREMONT, CA 91711	95-3627414	N/A	6,600.				PROGRAM GRANT
(11) NIRSA SERVICES CORPORATION							
4185 SW RESEARCH WAY CORVALLIS, OR 97333	93-1090612	501(C)(3)	6,500.				PROGRAM GRANT
(12) JOHNSON UNIVERSITY INC							
7900 JOHNSON DR KNOXVILLE, TN 37998	62-6001104	501(C)(3)	6,000.				PROGRAM GRANT
2 Enter total number of section 501(c)(3) ar	nd government	organizations lis	sted in the line 1 tal	ble			
3 Enter total number of other organizations	listed in the line	1 table					

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

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2022

OMB No. 1545-0047

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Name of the organization						Employer identificat	ion number
UNITED STATES TENNIS ASSOCIATION INCORPORATED						13-5459420	
Part I General Information on Grants a	nd Assistanc	е					
<ol> <li>Does the organization maintain records to the selection criteria used to award the gratical describe in Part IV the organization's process.</li> <li>Part II Grants and Other Assistance to Part IV, line 21, for any recipient.</li> </ol>	edures for mor	ee? nitoring the use <b>ganizations a</b> i	of grant funds in the	e United States.	plete if the organiz	ation answered "Y	Yes No
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) LINCOLN MEMORIAL UNIVERSITY							
6965 CUMBERLAND GAP PKWY HARROGATE TN 37752	62-0479542	501(C)(3)	6,000.				PROGRAM GRANT
(2) MILLIGAN UNIVERSITY							
1 BLOWERS BLVD MILLIGAN, TN 37682	62-0535755	501(C)(3)	6,000.				PROGRAM GRANT
(3) NORTHEACH TEXAS COMMUNITY COLLEGE FOUND.							
2886 FM 1735 MOUNT PLEASANT, TX 75455	75-2008835	501(C)(3)	6,000.				PROGRAM GRANT
(4) PFEIFFER UNIVERSITY							
48380 US HWY 52 N MISENHEIMER, NC 28109	56-0529990	501(C)(3)	6,000.				PROGRAM GRANT
(5) RADFORD UNIVERSITY FOUNDATION							
6226 UNIVERSITY PARK DR RADFORD, VA 24141	23-7219782	501(C)(3)	6,000.				PROGRAM GRANT
(6) MONMOUTH UNIVERSITY							
400 CEDAR AVE WEST LONG BEACH, NJ 07764	21-0634584	501(C)(3)	6,000.				PROGRAM GRANT
_(7) NORTH GREENVILLE UNIVERSITY							
7801 N TIGERVILLE RD TIGERVILLE, SC 29688	57-0314406	501(C)(3)	6,000.				PROGRAM GRANT
(8) MALIVAI WASHINGTON KIDS FOUND. INC.							
1055 WEST 6TH ST JACKSONVILLE, FL 32209	59-3559150	501(C)(3)	5,500.				PROGRAM GRANT
(9) METROPLEX TENNIS ASSOCIATION INC.							
5100 ELDORADO PARKWAY MCKINNEY, TX 75070	27-1168972	501(C)(3)	5,500.				PROGRAM GRANT
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) an  3 Enter total number of other organizations leads to the control of the control	-	=	sted in the line 1 tal	ble			

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

Schedule I (Form 990) 2022

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 non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 ADULT SENIOR CHAMPIONSHIP GRANT	5	8,700.			
2 DONATION	1	100.			
O					
3 EVENTS GRANT	10	5,500.			
4 JUNIOR ITF EVENT GRANT	2	12,500.			
5 LEAGUES GRANT	4	3,000.			
6 senior international play grant	90	109,250.			
<b>7</b> WHEELCHAIR GRANT	10	15,315.			

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

13-5459420

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>(b)</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
1 ZONAL COMPETITION GRANTS	3	9,000.			
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.

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. 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

(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
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.

PROJECTS REQUIRING RECONSTRUCTION OR NEW CONSTRUCTION OF A FACILITY. IF

AWARDED, PRIOR TO RECEIVING THEIR FUNDS, TENNIS VENUE SERVICES 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.

## **Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number 13-5459420

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	X First-class or charter travel Housing allowance or residence for personal use			
	X Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2	X	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.    X			
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:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
C	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
•	compensation contingent on the revenues of:			
а	The organization?	5a		
b	Any related organization?	5b		
-	If "Yes" on line 5a or 5b, describe in Part III.			
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:			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
-	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		
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	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 a	nd/or 1099-MISC and/or	1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
MICHAEL DOWSE (THRU 3/	(i)	149,091.	490,500.	4,076.	4,500.	29,397.	677,564.	NONE
1 EXEC. DIRECTOR & CEO	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
ANDREA HIRSCH (SEE SCH	(i)	677,143.	522,586.	22,786.	21,261.	15,116.	1,258,892.	NONE
2 COO & GENERAL COUNSEL	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
EDWARD NEPPL	(i)	496,585.	346,113.	21,274.	21,261.	32,749.	917,982.	NONE
3 CHIEF FINANCIAL OFFICER	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
LEWIS SHERR (SEE SCH.	(i)	856,298.	430,725.	804.	21,261.	37,763.	1,346,851.	NONE
4 CEO & EXECUTIVE DIRECTOR	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
STACEY MILKOVICH	(i)	655,223.	281,518.	21,334.	21,261.	40,613.	1,019,949.	NONE
5 CHIEF EXECUTIVE, PRO TENNIS	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
CRAIG MORRIS	(i)	525,169.	220,110.	446.	12,111.	40,613.	798,449.	NONE
6 CHIEF EXEC., COMM TENNIS&YOUTH	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
AMY WESLY	(i)	508,546.	205,125.	270.	21,261.	44,586.	779,788.	NONE
7 CHIEF BRAND OFFICER	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
PAUL MAYA	(i)	403,238.	170,385.	20,914.	21,261.	40,613.	656,411.	NONE
8 CHIEF TECHNOLOGY OFFICER	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
MARTIN BLACKMAN	(i)	451,364.	205,107.	20,914.	21,261.	42,809.	741,455.	NONE
9 GENERAL MANAGER	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
KRISTEN CORIO	(i)	413,434.	83,948.	280.	21,261.	40,493.	559,416.	NONE
10 CHIEF COMMERCIAL OFFICER	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
MARISA GRIMES	(i)	324,233.	151,626.	270.	21,261.	38,803.	536,193.	NONE
11 CHIEF DIVERSITY & INCLUS. OFF.	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
CRAIG ISAACS	(i)	295,814.	158,246.	21,274.	21,261.	34,099.	530,694.	NONE
12 GENERAL COUNSEL	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
	(i)							
_13	(ii)							
	(i)							
14	(ii)							
	(i)							
_15	(ii)							
	(i)							
16	(ii)							

#### Part | 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.

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 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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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UNITED STATES TENNIS ASSOCIATION INCORPORATED

13-5459420

#### FORM 990, PART III, LINE 4A:

US OPEN: UNITED STATES TENNIS ASSOCIATION INCORPORATED ("USTA" OR THE "ASSOCIATION") ORGANIZES AND CONDUCTS THE UNITED STATES OPEN TENNIS CHAMPIONSHIPS--THE US OPEN--WHICH IS ONE OF THE WORLD'S HIGHEST-ATTENDED ANNUAL SPORTING EVENTS AND ONE OF ITS PREMIER SPORTING ATTRACTIONS. 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 DEVELOPMENT OF TENNIS AS A MEANS OF HEALTHFUL RECREATION AND PHYSICAL FITNESS; TO ORGANIZE TENNIS TOURNAMENTS 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 GAME OF TENNIS TO THE GENERAL PUBLIC. A MAJOR GOAL OF THE US OPEN IS TO USE THE EVENT'S POPULARITY TO DRIVE PARTICIPATION IN THE SPORT. THE 2022 US OPEN WAS CONDUCTED WITHOUT COVID-19 RESTRICTIONS FOR THE FIRST TIME SINCE THE 2019 US OPEN. THE THREE-WEEK TOURNAMENT, WHICH BEGAN WITH US OPEN FAN WEEK AND CONTINUED WITH THE TWO WEEKS OF THE MAIN DRAW, DREW RECORD ATTENDANCE AS FANS FLOODED BACK TO THE NATIONAL TENNIS CENTER WITH EXCITEMENT AND ENTHUSIASM.

#### FORM 990, PART III, LINE 4B:

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

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UNITED STATES TENNIS ASSOCIATION INCORPORATED

13-5459420

THE GAME, PLAY THE GAME, AND TAKE ADVANTAGE OF ITS MANY PHYSICAL AND MENTAL HEALTH BENEFITS MEDICALLY PROVEN THROUGH A NUMBER OF STUDIES CONDUCTED IN RECENT YEARS. IT IS THE GOAL OF COMMUNITY TENNIS TO HELP PEOPLE FIND THEMSELVES IN THE GAME AT EVERY STEP ALONG THE PLAY PATHWAY.

IN 2022, TENNIS AGAIN SAW IMPRESSIVE GROWTH WITH 23.6 MILLION AMERICANS SAYING THEY PLAY THE SPORT, A 33% INCREASE OVER THE PAST THREE YEARS. THE USTA CONTINUED ITS SERIES OF PROGRAMS, GRANTS AND ADVOCACY ACTIONS ACROSS THE COUNTRY TO SPUR THIS GROWTH. 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. OTHER INITIATIVES INCLUDE DEVELOPING, FACILITY RENOVATIONS AND CONSTRUCTION; 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 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, FLORIDA, WHICH SERVES THE SPORT AT EVERY LEVEL OF PLAY AND DELIVERS AN

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OMB No. 1545-0047

2022

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Department of the Treasury Internal Revenue Service Name of the organization

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UNITED STATES TENNIS ASSOCIATION INCORPORATED

13-5459420

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.

#### FORM 990, PART III, LINE 4C:

PROFESSIONAL TENNIS OPERATIONS DIVISION: THE USTA PROFESSIONAL TENNIS OPERATIONS DIVISION CONSISTS OF PROFESSIONAL TOURNAMENTS, OFFICIATING, AND MAJOR EVENTS, INCLUDING THE OLYMPICS, DAVIS CUP AND BILLIE JEAN KING CUP, AND THE USTA PRO CIRCUIT. TOGETHER, THE DIVISION MANAGES 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 AND PARALYMPIC 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 BILLIE JEAN KING 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 BILLIE JEAN KING CUP TEAM HAS WON THE BJK CUP TITLE MORE THAN ANY OTHER NATION, A RECORD 18 TIMES. THE US OPEN SERIES, WHICH

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OMB No. 1545-0047

2022

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Department of the Treasury Internal Revenue Service

Name of the organization

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UNITED STATES TENNIS ASSOCIATION INCORPORATED

13-5459420

THE USTA LAUNCHED IN 2004, LINKS 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 TELEVISION SCHEDULE ALLOWING FOR "APPOINTMENT TELEVISION." MEANWHILE, THE USTA SUPPORTS 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.

### 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 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 BYLAWS AND OTHER VOTING RIGHTS PURSUANT TO NEW YORK STATE NOT-FOR-PROFIT CORPORATION

#### 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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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UNITED STATES TENNIS ASSOCIATION INCORPORATED

13-5459420

LAW.

#### FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 WAS PREPARED BY A NATIONALLY RECOGNIZED 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.

#### 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 CHIEF 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 CHIEF 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 EXECUTIVE OFFICER AND/OR THE CHAIR OF THE RESPECTIVE NATIONAL COMMITTEE. THE CHIEF ETHICS OFFICER AND THE AUDIT COMMITTEE (FOR VOLUNTEERS) 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,

### 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.

OMB No. 1545-0047 Open to Public Inspection

13-5459420

Department of the Treasury Internal Revenue Service

Name of the organization

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Employer identification number

UNITED STATES TENNIS ASSOCIATION INCORPORATED

DELIBERATING AND DECIDING ISSUES AND/OR IN TRANSACTIONS).

#### FORM 990, PART VI, SECTION B, LINE 15:

THE COMPENSATION COMMITTEE HAS RESPONSIBILITY FOR ESTABLISHING A COMPENSATION STRATEGY AND SETTING THE COMPENSATION OF THE EXECUTIVE DIRECTOR AND CHIEF EXECUTIVE OFFICER, 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 OPERATING OFFICER AND GENERAL COUNSEL; THE CHIEF FINANCIAL OFFICER; CHIEF EXECUTIVE, PRO TENNIS; CHIEF EXECUTIVE, COMMUNITY TENNIS; CHIEF COMMERCIAL OFFICER; CHIEF BRANDING OFFICER; AND THE 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 2022.

#### FORM 990, PART VI, SECTION C, LINE 19:

THE ASSOCIATION'S BYLAWS ARE LOCATED ON ITS WEBSITE (USTA.COM). THE ASSOCIATION'S 990'S ARE LOCATED ON ITS WEBSITE (USTA.COM) AND UPON

### 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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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UNITED STATES TENNIS ASSOCIATION INCORPORATED

13-5459420

REQUEST THE PUBLIC IS PROVIDED COPIES OF THE ASSOCIATION'S INFORMATION

RETURN ON FORM 990. LASTLY, THE CONFLICT OF INTEREST POLICY CAN BE FOUND

AT WWW.ETHICSPOINT.COM UNDER THE WEBSITE DESIGNED FOR THE ASSOCIATION AND

IS ALSO AVAILABLE UPON REQUEST FROM THE ASSOCIATION'S LEGAL DEPARTMENT.

#### FORM 990, PART VII, SECTION A, LINE 1:

COMPENSATION REPORTED ON PART VII FOR LEWIS SHERR IS FOR HIS POSITION AS CHIEF REVENUE OFFICER THROUGH MAY 1, 2022 AND CEO & EXECUTIVE DIRECTOR EFFECTIVE MAY 2, 2022 THROUGH THE REMAINDER OF THE YEAR.

COMPENSATION REPORTED ON PART VII FOR ANDREA HIRSCH IS FOR HER POSITION AS CAO THROUGH JUNE 30, 2022 AND COO EFFECTIVE JULY 1, 2022 THROUGH THE REMAINDER OF THE YEAR.

#### FORM 990, PART XI, LINE 5:

THE AMOUNT ON LINE 5 REPRESENTS THE NET CHANGE IN UNREALIZED LOSS ON INVESTMENTS WHICH IS INCLUDED IN THE ASSOCIATION'S AUDITED CONSOLIDATED FINANCIAL STATEMENTS.

Name of the organization

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

FORM 990, PART III, LINE 1 - 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 577,081 INDIVIDUAL MEMBERS, 8,413 ORGANIZATIONAL MEMBERS AND A PROFESSIONAL STAFF AND VOLUNTEERS DEDICATED TO GROWING THE GAME.

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

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
CLUBSPARK		
200 SOUTH ORANGE AVENUE		
ORLANDO, FL 32801	COACH CONSULTANT	4,255,449.
IBM CORPORATION		
1 NORTH CASTLE DRIVE		
ARMONK, NY 10504	DIGITAL ENHANCEMENT	3,952,189.
EPAM SYSTEMS INC.		
41 UNIVERSITY DRIVE		
NEWTOWN, PA 18940	IT CONSULTANT	3,923,253.
SMT/IDS		
10275 CENTURION COURT		
JACKSONVILLE, FL 32256	STATISTICS SERVICES	2,349,085.
HAWK-EYE INNOVATIONS NORTH AMERICA LLC		
115 W CENTURY ROAD, SUITE 250		
PARAMUS, NJ 07652	SPORTS TECH. SVCS	2,110,856.

#### SCHEDULE R (Form 990)

# **Related Organizations and Unrelated Partnerships**

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2022

Open to Public Inspection

ne of the organization	Employer identification number
NITED STATES TENNIS ASSOCIATION INCORPORATED	13-5459420

Part I Identification of Disregarded Entities. Complete if the organization	on answered "Yes" o	n Form 990, Part I'	V, 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 20-0984914					
2500 WESTCHESTER AVENUE, #411 PURCHASE, NY 10577	TENNIS	DE	226,985.	2,967.	USTA
_(2)					
(3)					
(4)					
(5)					
(6)					

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	Section 5	g) 512(b)(13) rolled ity?
						Yes	No
(1) USTA NATIONAL TENNIS CENTER, INC. 13-2946690							
2500 WESTCHESTER AVENUE, #411 PURCHASE, NY 10577	TENNIS	NY	501(C)(3)	10	USTA		Х
(2) USTA FOUNDATION, INC. 13-3782331							
2500 WESTCHESTER AVENUE, #411 PURCHASE, NY 10577	GRANT GIVING	NY	501(C)(3)	7	USTA		Х
(3) USTA PLAYER DEVELOPMENT, INC. 27-1368195							
2500 WESTCHESTER AVENUE, #411 PURCHASE, NY 10577	YOUTH DEVELOP	NY	501(C)(3)	12A	USTA		Х
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2022

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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	gal Direct controlling entity Predominant income (related, unrelated, excluded from tax under Share of total share of end-of-income year assets		t controlling entity Predominant income (related, unrelated, excluded from tax under		(h) (i) code V - amount in I of Schedul (Form 10				(k) Percentage ownership	
		,		,			Yes	No		Yes	No	
(1) CINCINNATI TENNIS 26-4273680												
2500 WESTCHESTER AVENUE PURCHA	TENNIS TOURNAMENT	DE	USTA					Х				93.8000
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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.

				<u> </u>				
(a) Name, address, and EIN of related organization	<b>(b)</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	Section 512(b)(13) controlled entity?
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

Part V

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

Not	te: 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?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to related organization(s)	1b	Χ	<u> </u>
С	Gift, grant, or capital contribution from related organization(s)	1c		X
	Loans or loan guarantees to or for related organization(s)	1d		X
е	Loans or loan guarantees by related organization(s)	1e	Χ	<u> </u>
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		X
	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	Χ	<u> </u>
ı		11		X
m	Performance of services or membership or fundraising solicitations by related organization(s)	1 m		X
n			Χ	
	Sharing of paid employees with related organization(s)	10	Χ	<u> </u>
р	Reimbursement paid to related organization(s) for expenses	1 p		X
q	Reimbursement paid by related organization(s) for expenses	1q	Χ	<u> </u>
r	= $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$	1r		X
s	Other transfer of cash or property from related organization(s)	1s		X
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 thresh	olds	s.	

(a)  Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved
(1) USTA FOUNDATION INCORPORATED	В	427,360.	CASH
(2) USTA FOUNDATION INCORPORATED	N	374,809.	FMV
(3) USTA FOUNDATION INCORPORATED	0	2,578,083.	FMV
(4) USTA FOUNDATION INCORPORATED	Q	642,266.	CASH
(5) USTA NATIONAL TENNIS CENTER INC	K	2,714,255.	CASH
(6) USTA PLAYER DEVELOPMENT INC.	В	11,271,962.	CASH

Part V Transact

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

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Y	es No
1	During the tax year, did the organization engage in any of the following transactions with one or more	related organizations lis	sted in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a	
b	Gift, grant, or capital contribution to related organization(s)				1b	
С	Gift, grant, or capital contribution from related organization(s)				1c	
	Loans or loan guarantees to or for related organization(s)				1d	
е	Loans or loan guarantees by related organization(s)				1e	
f	Dividends from related organization(s)				1f	
g	Sale of assets to related organization(s)				1g	
h	Purchase of assets from related organization(s)				1h	
i	Exchange of assets with related organization(s)				1i	
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	
k	Lease of facilities, equipment, or other assets from related organization(s) $\dots$				1k	
I	$Performance\ of\ services\ or\ membership\ or\ fundraising\ solicitations\ for\ related\ organization (s)\ \dots\ \dots$				11	
	Performance of services or membership or fundraising solicitations by related organization(s)				1m	
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) $\dots \dots$				1n	
0	Sharing of paid employees with related organization(s)				10	
р	Reimbursement paid to related organization(s) for expenses				1p	
q	Reimbursement paid by related organization(s) for expenses				1q	
	Other transfer of cash or property to related organization(s)				1r	
<u>s</u>	Other transfer of cash or property from related organization(s).	de la compania de la			1s	
	If the answer to any of the above is "Yes," see the instructions for information on who must complete to	· · · · · ·		action thres		
	(a) Name of related organization	(b) Transaction	<b>(c)</b> Amount involved	Method o	(d) of determ	nining
		type (a - s)		amou	nt involve	ed
(1)	USTA PLAYER DEVELOPMENT INC.	D	12,359,638.	CASH		
(1)	USIA PLAYER DEVELOPMENT INC.	υ 	12,359,030.	CASH		
(2)	USTA PLAYER DEVELOPMENT INC.	N	1,182,953.	COST		
(-)	OSIA FLATER DEVELOPMENT INC.	IV	1,102,755.	CO51		
(3)	NAT'L TENNIS CENTER, INC SEE PART VII	N/O				
(0)	NAT II TENNITO CENTERC, INC. DEE TART VII	147 0				
(4)	USTA PLAYER DEVELOPMENT INC SEE PART VII	0				
<u> </u>	OCT. TELLE BEYEROTIEM THO. ORD THAT YEL					
(5)	USTA PLAYER DEVELOPMENT INC SEE PART VII	0		CASH		
	· · · · · · · · · · · · · · · · · · ·	_		1		
(6)						

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

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

(a) Name, address, and EIN of entity	(state or foreign		(d) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)  (e) Are all partners section 501(c)(3) organizations?  Yes No			(f) Share of total income	(f) (g) Share of total income assets		h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?		(k) Percentage ownership	
			sections 512 - 514)	Yes	No			Yes	No	(1 01111 1000)	Yes	No		
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
<u>(10)</u>														
(11)														
(12)														
(13)														
(14)														
(15)														
(16)														
(10)														

# Part VII Supple

#### Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

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 10 - EXECUTIVE AND ADMINISTRATIVE STAFF OF USTA PROVIDE ASSISTANCE
TO THE USTA NATIONAL TENNIS CENTER INC AT NO CHARGE.

LINE 10 - EXECUTIVE AND ADMINISTRATIVE STAFF OF THE USTA PROVIDE ASSISTANCE TO USTA PLAYER DEVELOPMENT INC AT NO CHARGE.

LINE 1Q - EFFECTIVE JANUARY 1, 2021 THE UNITED STATES TENNIS ASSOCIATION INCORPORATED ("USTA") WAS THE COMMON PAYMASTER FOR ALL EMPLOYEES OF PLAYER DEVELOPMENT.