Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service

▶ 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.

A F	or th	e 2020	calendar year, or tax year beginning , 2020,	and ending			, 20			
ь.			C Name of organization		D Employer ide	ntifica	tion number			
В	Check if a	ipplicable:	UNITED STATES TENNIS ASSOCIATION INCORPORATE	ED	13-545	9420)			
	Addre		Doing business as							
	7	e change	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone nu	mber				
	Initial	l return	70 WEST RED OAK LANE		(914) 69	6 – 7	000			
		return/	City or town, state or province, country, and ZIP or foreign postal code							
	Amer		WHITE PLAINS, NY 10604	G Gross receipts	G Gross receipts \$ 285,682,415.					
		cation	F Name and address of principal officer: PATRICK GALBRAITH	H(a) Is this a gro		n for Yes X No				
	pend	ing	70 WEST RED OAK LANE, WHITE PLAINS, NY 10604	1	subordinates H(b) Are all subord		cluded? Yes No			
ī	Tax-ex	cempt st	atus: 501(c)(3) X 501(c) (6) ◀ (insert no.) 4947(a)(1) c	or 527	If "No," a	ttach a	list. See instructions			
J	Websi	ite: ►	WWW.USTA.COM		H(c) Group exem	ption nu	umber >			
K	Form	of organ	nization: X Corporation Trust Association Other	L Year of f	ormation: 1973 M	State	of legal domicile: NY			
	art I		ımmary							
	1		v describe the organization's mission or most significant activities: TO PRO	MOTE AND	DEVELOP THE	GR	OWTH OF			
ø	-		NIS AS A MEANS OF HEALTHFUL RECREATION AND PHY							
anc										
ērn	2	Check	this box if the organization discontinued its operations or dispose	d of more than	25% of its net asset	s.				
ó	3	Numb	er of voting members of the governing body (Part VI, line 1a)			3	15.			
≪ ්	4		er of independent voting members of the governing body (Part VI, line 1b)			4	15.			
Activities & Governance	5		number of individuals employed in calendar year 2020 (Part V, line 2a)			5	652.			
ŧΞ	6		number of volunteers (estimate if necessary)			6	500.			
Ą	7a		unrelated business revenue from Part VIII, column (C), line 12			7a	253,977.			
			nrelated business taxable income from Form 990-T, Part I, line 11			7b	160,299.			
				Current Year						
a	8	Contri	ibutions and grants (Part VIII, line 1h) COPY FC	OR T	19,047,20	18.	17,236,192.			
ů	9	Progra	am service revenue (Part VIII, line 2g) PUBLIC INSP		296,914,97	6.	178,171,702.			
Revenue	10		ment income (Part VIII, column (A), lines 3, 4, and 7d)		14,302,20	1.	2,157,116.			
œ	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,898,11	2.	1,368,017.			
	12		revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		332,162,49	7.	198,933,027.			
	13		s and similar amounts paid (Part IX, column (A), lines 1-3)		75,101,04	7.	56,320,478.			
	14		its paid to or for members (Part IX, column (A), line 4)			0.	0.			
S	15		es, other compensation, employee benefits (Part IX, column (A), lines 5-10)	I	60,834,89	1.	57,903,580.			
Expenses	16 a	Profes	ssional fundraising fees (Part IX, column (A), line 11e)	[0.	0.			
xbe	b		fundraising expenses (Part IX, column (D), line 25) ▶ 0							
Ш	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		170,744,44	5.	137,442,600.			
	18	Total	expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	[306,680,38		251,666,658.			
	19	Rever	nue less expenses. Subtract line 18 from line 12		25,482,11	4.	-52,733,631.			
s or					Beginning of Current `	r ear	End of Year			
sets	20	Total	assets (Part X, line 16)		433,881,34		397,273,094.			
Net Assets or Fund Balances	21	Total	liabilities (Part X, line 26)		73,077,68		99,791,017.			
2급	22		ssets or fund balances. Subtract line 21 from line 20	<u> </u>	360,803,65	3.	297,482,077.			
Pa	irt II	Sig	gnature Block							
Un	der per	nalties o	of perjury, I declare that I have examined this return, including accompanying schedu complete. Declaration of preparer (other than officer) is based on all information of whice	les and stateme	ents, and to the best of	f my k	nowledge and belief, it is			
	, 00110	Jot, and	complete. Beclaration of property (ethor than emoty) to become on an information of thine	ni proparor nao	any knowledge.					
Sig	ın	-								
He			Signature of officer		Date					
116	16	-								
			Type or print name and title	T. 5 ·	, ,	1 .	NTIN I			
Paid	1		Type preparer's name F harer's signature	Date	Check	J "'	PTIN			
	parer	PAU	Con a some desimble	11/15/			P01384178			
	Only		sname ▶BDO USA, LLP		Firm's EIN ▶ 1					
		Firm's	address ▶100 PARK AVENUE, NEW YORK, NY 10017-500		1 110110 1101		885-8000			
Ma	y the	IRS d	iscuss this return with the preparer shown above? (see instructions)							
For	Pape	rwork	Reduction Act Notice, see the separate instructions.				Form 990 (2020)			

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UNITED STATES TENNIS ASSOCIATION INCORPORATED 13-5459420 Form 990 (2020) Page 2 Part III **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: ATTACHMENT 1 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?..... If "Yes," describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$ including grants of \$ US OPEN - SEE SCHEDULE O 4b (Code:) (Expenses \$ including grants of \$ COMMUNITY TENNIS DEVELOPMENT - SEE SCHEDULE O) (Expenses \$ including grants of \$) (Revenue \$ PROFESSIONAL TENNIS OPERATIONS DIVISION - SEE SCHEDULE O

4e Total program service expenses ▶

(Expenses \$

4d Other program services (Describe on Schedule O.)

including grants of \$

JSA 0E1020 1.000 Form **990** (2020) 44740U 702V PAGE 4

) (Revenue \$

Part	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		37
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	.		
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,		х	
6	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	5	Λ	
0	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? <i>If "Yes," complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"	-		
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	l	37	
	complete Schedule D, Part VI	11a	Х	
D	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more	446	Х	
•	of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	Λ	
C	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	Х	
Ч	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	110		
<u> </u>	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	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	Х	
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
D	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? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i>	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	,	Х	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	∠_	

Form **990** (2020) PAGE 5

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Part	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		res	NO
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
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			
04-	employees? If "Yes," complete Schedule J.	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$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		
С	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		
	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	200		
	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%	20		Х
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		
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
•	Part IV instructions, for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines $28a$ or $28b$? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	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? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		37	
34	sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i> . Was the organization related to any tax-exempt or taxable entity? <i>If</i> "Yes," <i>complete Schedule R, Part II, III,</i>	33	Х	
34	or IV, and Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
•	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 in Schedule O for Part VI, lines 11b and			
	19? Note: 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	<u> </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 800			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
JSA	reportable gaming (gambling) winnings to prize winners?	1c	X	(2002)
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	V 20 7.01			(

Par	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 652			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
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	Х	
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)?	4a		X
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		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			3.7
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
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		
	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	7.0		
	required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	7e		
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
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 organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7		
Ü	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	44-		X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Λ
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15	Х	
	excess parachute payment(s) during the year?	15	Λ	
4.0	If "Yes," see instructions and file Form 4720, Schedule N.	16		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		-22
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Page 6

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI 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			• • •		
0000	Ton A. Coverning Body and management				Yes	No
		1a	15			
1a	Enter the number of voting members of the governing body at the end of the tax year	Та				
	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					
	committee, explain on Schedule O.		1 -			
b	Enter the number of voting members included on line 1a, above, who are independent	1b	15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business re-	lations	ship with			
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or ur	nder t	he direct			
	supervision of officers, directors, trustees, or key employees to a management company or other p	persor	1?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi	led?.		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	X	
7a	Did the organization have members, stockholders, or other persons who had the power to el	ect o	r appoint			
	one or more members of the governing body?			7a	Х	
b						
	stockholders, or persons other than the governing body?			7b	X	
8	Did the organization contemporaneously document the meetings held or written actions under					
	the year by the following:					
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot					
·	the organization's mailing address? <i>If</i> "Yes," <i>provide the names and addresses on Schedule O</i>			9		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Inte			Code	.)	
					Yes	No
102	Did the organization have local chapters, branches, or affiliates?			10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of					
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt po		-	10b		
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fi	•		11a	Х	
11a		iiig iii	e ioiiii? .			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			12a	Х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			124		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests to			12b	Х	
	rise to conflicts?			120		
С	Did the organization regularly and consistently monitor and enforce compliance with the p	-		12c	Х	
	describe in Schedule O how this was done			13	X	
13	Did the organization have a written whistleblower policy?			14	X	-
14	Did the organization have a written document retention and destruction policy?			14		
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			150	X	
а	The organization's CEO, Executive Director, or top management official			15a	X	_
b	Other officers or key employees of the organization			15b	Λ	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar	r arra	ingement	40-		X
	with a taxable entity during the year?			16a		
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			4.01		
04	organization's exempt status with respect to such arrangements?			16b		
	ion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ►CA, FL,					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), (3)s only) available for public inspection. Indicate how you made these available. Check all that ap		and 990-T	(Sec	tion 5	υ1(c)
			a (1)			
			,			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents of the control of	nents,	conflict o	t 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 bush accounting dept, 70 west red dak lane, white plains, NY 10604 914-696-7000	oooks	and record	s ▶		

Form **990** (2020)

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, 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 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 dotted line)	box,	unles er and	Pos heck ss pe	rson	e than of the both or/trust Highest compensated employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	40.00									
(1) LEWIS SHERR CHIEF REVENUE OFFICER	40.00				X			1,377,228.	0.	43,295.
(2) ANDREA HIRSCH	40.00				Α			1,3//,220.	0.	43,295.
CAO & GENERAL COUNSEL	0.			Х				944,664.	0.	21,433.
(3) STACEY MILKOVICH	40.00							744,004.	0.	21,433.
CHIEF EXECUTIVE, PRO TENNIS	0.				Х			873,717.	0.	46,045.
(4) MICHAEL DOWSE (FROM 1/20)	35.00							0/3,/17.	· · ·	10,013.
EXECUTIVE DIRECTOR & CEO	20.00			x				859,092.	0.	45,552.
(5) GORDON A. SMITH	0.							337,372		
FORMER CEO & EXECUTIVE DIR.	0.						X	756,766.	0.	0.
(6) EDWARD NEPPL	40.00									
CHIEF FINANCIAL OFFICER	0.			Х				690,755.	0.	40,065.
(7) AMY WESLY	40.00									
CHIEF MARKETING OFFICER	0.					Х		666,863.	0.	48,287.
(8) CRAIG MORRIS	40.00									
CHIEF EXEC., COMM TENNIS&YOUTH	0.				Х			659,184.	0.	46,045.
(9) KURT KAMPERMAN	40.00									
CHIEF EXEC., NATIONAL CAMPUS	0.				Х			655,361.	0.	40,065.
(10) PAUL MAYA	40.00									
CHIEF TECHNOLOGY OFFICER	0.					Х		556,984.	0.	46,045.
(11) CHRISTIAN WIDMAIER	40.00									
MANAGING DIR. CORP. COMMUNICAT	0.					Х		437,295.	0.	46,045.
(12) STACIELLEN MISCHEL	40.00									
ASSOC. GEN. COUNSEL & DEP. CLO	0.					X		413,718.	0.	40,065.
(13) DARIO ROY OTERO	40.00									
CHIEF PRO. TENNIS OFFICER	0.					Х		402,266.	0.	47,154.
(14) PATRICK GALBRAITH	19.00									_
CHAIRMAN & PRESIDENT	5.00	X		Х				26,250.	0.	0.

Form **990** (2020)

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Part VII Section A. Officers, Directors, 7	Γrustees, Κα	y En	nplo	ye	es,	and H	ligl	hest Compensat	ted Employees (continued)				
(A) Name and title	Average hours per week (list any hours for related organizations below dotted line)	box,	unles	Pos heck ss pe	erson	e than on is both; tor/truste etor/truste employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	com fr org and	stimated nount of other pensation om the anization d related anizations		
15) MICHAEL MCNULTY III	10.00												
FIRST VICE PRESIDENT	7.00	X		Х				18,750	0.				
16) DR. BRIAN HAINLINE	9.00												
VICE PRESIDENT	7.00	X		Х				15,000	. 0.				
17) LAURA F. CANFIELD	9.00												
VICE PRESIDENT	4.00	Х		X				15,000	0.				
18) THOMAS HO	9.00												
SECRETARY & TREASURER	4.00	X		Х				15,000	0.				
19) KATRINA ADAMS	5.00												
PAST PRESIDENT	3.00	Х		X				7,500	0.				
20) VIOLET CLARK	5.00												
DIRECTOR	3.00	X						7,500	0.				
21) CHARLES GILL	5.00												
DIRECTOR	3.00	X						7,500	0.				
22) LIEZEL HUBER	5.00												
DIRECTOR	3.00	X						7,500	0.				
23) ELENI ROSSIDES	5.00												
DIRECTOR	3.00	X						7,500	0.				
24) NEHA UBEROI	5.00												
DIRECTOR	3.00	X						7,500	0.				
25) BRIAN VAHALY	5.00												
DIRECTOR	3.00	X						7,500	0.				
1b Sub-total							ightharpoons	9,436,393.	0.		510,096		
c Total from continuation sheets to Part VII,	_						ightharpoons	18,333.	0.		0		
d Total (add lines 1b and 1c)							>	9,454,726.	0.		510,096		
2 Total number of individuals (including but no reportable compensation from the organization)				d a	bov	e) who	re	eceived more than	\$100,000 of				
											Yes No		
3 Did the organization list any former of	ficer, directo	or. or	trı	ıste	e.	kev e	mn	lovee, or highes	t compensated				
employee on line 1a? If "Yes," complete Scho										3	Х		
• •													
4 For any individual listed on line 1a, is the organization and related organizations													
individual	grouter trial	ψιο	,0,0	:	11	163	, '	complete deneda	no o roi suori	4	Х		

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 2		

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 ▶ 112

Form **990** (2020)

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Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	ıplo	yee	es, a	and H	ligl	hest Compensat	ed Employees (d	Page (continued)
(A)	(B)	ĺ	•	, (C				(D)	(E)	(F)
Name and title	Average hours per week (list any hours for related organizations below dotted line)	box,	unles	s per	more son	e than the the than the than the than the than the the than the the than the	an	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
26) SAM WARBURG	5.00									
DIRECTOR	3.00	X						7,500	0.	
27) JEFFERY BAILL	5.00									
DIRECTOR	3.00	Х						7,500	0.	
28) KURT ZUMWALT	5.00									
DIRECTOR	6.00	Х						3,333	0.	
1b Sub-total							>	18,333.	0.	0
c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A						>			
2 Total number of individuals (including but not reportable compensation from the organization	limited to t		liste				re	ceived more than	\$100,000 of	
· · · · · · · · · · · · · · · · · · ·										Yes No
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schede										3 X
4 For any individual listed on line 1a, is the sorganization and related organizations graindividual	eater than	\$15	50,00	00?	If	"Yes,	." (complete Schedu	le J for such	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "You										5 X
Section B. Independent Contractors										
 Complete this table for your five highest com- compensation from the organization. Report of year. 										

(A) Name and business address	(B) Description of services	(C) Compensation

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 ►

Form **990** (2020)

Form 990 (2020) UNI Part VIII Statement of Revenue

ı aı	· VIII	Check if Schedule O contains a respor	nse or note to an	y line in this Part V	'III		
		·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	17,186,192.				
۾ ٽي ڪ ڳ	С	Fundraising events 1c					
ifts ITA	d	Related organizations 1d					
פֻּבּ	e	Government grants (contributions) 1e					
Sin	f	All other contributions, gifts, grants,					
er (-	and similar amounts not included above . 1f	50,000.				
혈훈	g	Noncash contributions included in	,				
a it	9	lines 1a-1f 1g	\$				
ဗ္ဗ င	h	Total. Add lines 1a-1f		17,236,192.			
			Business Code				
Se	2a	TOURNAMENT RELATED	713940	177,621,397.	177,621,397.		
Program Service Revenue	b	TENNIS PROGRAM FEES	713940	508,368.	508,368.		
S J	C	BALL TEST FEES	713940	41,937.	41,937.		
ame	d						
ρŠ	<u> </u>						
P	f	All other program service revenue					
	g	Total. Add lines 2a-2f		178,171,702.			
	3	Investment income (including dividends,					
		other similar amounts)		-314,477.			-314,477.
	4	Income from investment of tax-exempt bond	. [0.			
	5	Royalties		1,114,040.			1,114,040.
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)		0.			
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a 89,220,981.					
<u>•</u>	b	Less: cost or other basis					
evenue		and sales expenses 7b 86,749,388.					
ě	С	Gain or (loss) 7c 2,471,593.					
	d	Net gain or (loss)		2,471,593.			2,471,593.
Other F	8a	Gross income from fundraising					
Ö		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a	0.				
	b	Less: direct expenses 8b	0.				
	С	Net income or (loss) from fundraising events.		0.			
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	0.				
	b	Less: direct expenses 9b	0.				
	С	Net income or (loss) from gaming activities.	<u> ▶ </u>	0.			
	10a	Gross sales of inventory, less					
		returns and allowances 10a	0.				
	b	Less: cost of goods sold	0.				
	c	Net income or (loss) from sales of inventory		0.			
<u>s</u>			Business Code				
Miscellaneous Revenue	11a	ADVERTISING	541800	253,977.		253,977.	
and	b						
e e	C						
Ĭš R	d	All other revenue					
	е	Total. Add lines 11a-11d	▶	253,977.			
	12	Total revenue. See instructions		198,933,027.	178,171,702.	253,977.	3,271,156.

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Form **990** (2020)

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Page 10

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to any line in this Part IX										
	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	56,240,653.									
2	Grants and other assistance to domestic										
_	individuals. See Part IV, line 22	79,825.									
3	Grants and other assistance to foreign										
·	organizations, foreign governments, and										
	foreign individuals. See Part IV, lines 15 and 16	0.									
4	Benefits paid to or for members	0.									
	Compensation of current officers, directors,										
•	trustees, and key employees	6,562,502.									
6	Compensation not included above to disqualified										
Ŭ	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)	756,766.									
7	Other salaries and wages	41,139,300.									
	Pension plan accruals and contributions (include										
•	section 401(k) and 403(b) employer contributions)	949,236.									
9	Other employee benefits	5,464,531.									
10	Payroll taxes	3,031,245.									
	Fees for services (nonemployees):										
	Management	0.									
	Legal	754,775.									
	Accounting	259,500.									
	Lobbying	0.									
	Professional fundraising services. See Part IV, line 17	0.									
	f Investment management fees	442,156.									
	Other. (If line 11g amount exceeds 10% of line 25, column										
	(A) amount, list line 11g expenses on Schedule O.)	14,363,282.									
12	Advertising and promotion	2,635,519.									
13	Office expenses	1,497,689.									
14	Information technology	8,750,976.									
15	Royalties	0.									
16	Occupancy	3,487,437.									
17	Travel	6,985,207.									
18	Payments of travel or entertainment expenses										
	for any federal, state, or local public officials	0.									
19	Conferences, conventions, and meetings	227,808.									
20	Interest	0.									
21	Payments to affiliates	0.									
22	Depreciation, depletion, and amortization	12,289,530.									
23	Insurance	3,455,171.									
24	Other expenses. Itemize expenses not covered										
	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	52,600,032.									
	TENNIS EVENT PRODUCTIONS	9,771,783.									
	MEMBERSHIP CALL CENTER EXP	2,281,043.									
	PRINTING & PUBLICATIONS	3,354,207.									
	All other expenses	14,286,485.									
	Total functional expenses. Add lines 1 through 24e	251,666,658.									
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and										
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	0.									
	-			1	<u> </u>						

Form **990** (2020)

Part X Balance Sheet

	art A	Check if Schedule O contains a response or note to any line in this P	art X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	12,464,806.	1	666,734.
	2	Savings and temporary cash investments	107,572,012.	2	107,305,688.
	3	Pledges and grants receivable, net	0.	3	0.
	4	Accounts receivable, net	45,845,712.	4	120,150,166.
	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	0.	5	0.
	6	Loans and other receivables from other disqualified persons (as defined			
		under section $4958(f)(1)$), and persons described in section $4958(c)(3)(B)$.	0.	6	0.
ts	7	Notes and loans receivable, net	4,582,053.	7	3,784,481.
Assets	8	Inventories for sale or use	1,337,792.	8	1,421,667.
⋖	9	Prepaid expenses and deferred charges	7,161,809.	9	8,111,565.
	10 a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 143 , 252 , 535 .			
	b	Less: accumulated depreciation	81,046,632.	10c	76,160,711.
	11	Investments - publicly traded securities	34,918,518.	11	355,447.
	12	Investments - other securities. See Part IV, line 11	105,779,036.	12	57,441,945.
	13	Investments - program-related. See Part IV, line 11.	33,094,671.	13	21,602,344.
	14	Intangible assets	0.	14	0.
	15	Other assets. See Part IV, line 11	78,300. 433,881,341.	15	272,346. 397,273,094.
_	16	Total assets. Add lines 1 through 15 (must equal line 33)	34,822,322.	16	28,126,470.
	17	Accounts payable and accrued expenses	0.	17	28,120,470.
	18	Grants payable	37,065,223.	18 19	45,476,904.
	19 20	Deferred revenue.	0.	20	0.
	21	Tax-exempt bond liabilities	0.	21	0.
w	22	Loans and other payables to any current or former officer, director,	<u> </u>	41	<u> </u>
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
į		controlled entity or family member of any of these persons	0.	22	0.
Ë	23	Secured mortgages and notes payable to unrelated third parties	0.	23	25,000,000.
	24	Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	1,190,143.	25	1,187,643.
	26	Total liabilities. Add lines 17 through 25	73,077,688.	26	99,791,017.
Section		Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
alar	27	Net assets without donor restrictions	360,803,653.	27	297,482,077.
Ä	28	Net assets with donor restrictions	0.	28	0.
Assets or Fund Balances		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	
sets	30	Paid-in or capital surplus, or land, building, or equipment fund.		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net.	32	Total net assets or fund balances	360,803,653.	32	297,482,077.
	33	Total liabilities and net assets/fund balances	433,881,341.	33	397,273,094.
					Form 990 (2020)

Form **990** (2020)

44740U 702V V 20-7.6F PAGE 14

Page **12** Form 990 (2020)

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	1	98,9	33,0	27.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	251,666,658.				
3	Revenue less expenses. Subtract line 2 from line 1							
4								
5								
6	Donated services and use of facilities	6				0.		
7	Investment expenses	7				0.		
8	Prior period adjustments	8				0.		
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line							
	32, column (B))	10	2	97,4	82,0	77.		
Part	XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII							
					Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplair	in in					
	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 cor	npiled	or					
	reviewed on a separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?			2b	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted o	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 over	ersigh	t of					
	the audit, review, or compilation of its financial statements and selection of an independent accounta	nt?.		2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, e	xplain	on					
	Schedule O.							
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in	the					
	Single Audit Act and OMB Circular A-133?			3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo	the					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	udits		3b				

Form **990** (2020)

V 20-7.6F 44740U 702V PAGE 15

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

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.

Гах)	(See separate instructions), the		Tax) (See separate ir	nstructions) or Form 990-E	EZ, Part V, line 35c (Prox
	Section 501(c)(4), (5), or (6) orga	anizations: Complete Part III.		T =	
	e of organization			1	ntification number
		SSOCIATION INCORPORATED		13-5459	
Pai		organization is exempt under			
1	Provide a description of the	organization's direct and indirect p	olitical campaign ac	ctivities in Part IV. (See in	nstructions for
	definition of "political campa	nign activities")			
2		xpenditures (See instructions)			
3	Volunteer hours for political	campaign activities (See instruction	ns)		
Par		organization is exempt under s			
1		cise tax incurred by the organizatio			
2		cise tax incurred by organization m			
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
b	If "Yes," describe in Part IV.				
Pai	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	line 17b	enditures. Add lines 1 and 2. Ent			
4 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 tributions received that were prom nd or a political action committee (I	er (EIN) of all section ter the amount paic ptly and directly de	on 527 political organiza I from the filing organiz livered to a separate po	ations to which the filing ation's funds. Also ente ditical organization, sucl
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2020

Sch	edule C (Form 990 or 990-EZ) 2020	ONT.I.ED	STATES	TENNIS ASSOCI.	ATTON INCOR	PORATED 13-5	459420 Page 2
Pa	cart II-A Complete if the org	janizati	on is exen	npt under sectior	n 501(c)(3) and	filed Form 5768 (ele	ction under
Α				affiliated group (and excess lobbying expe		ach affiliated group mem	iber's name,
В	Check ▶ if the filing organiz	ation ch	ecked box A	A and "limited contro	l" provisions app	oly.	
	Limits (The term "expendit		ying Expendence)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to i					0	<u> </u>
	Total lobbying expenditures to i						
	Total lobbying expenditures (ad		•	• •	• • • • • • •		
	Other exempt purpose expendit				F		
	• Total exempt purpose expendit	-					
	Lobbying nontaxable amount.						
-	columns.			g			
	If the amount on line 1e, column (a) or (b) is:	The lobbying	g nontaxable amount	is:		
	Not over \$500,000	, (,		amount on line 1e.			
	Over \$500,000 but not over \$1,000	0.000		us 15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,5			us 10% of the excess			
	Over \$1,500,000 but not over \$17,			us 5% of the excess of			
	Over \$17,000,000		\$1,000,000				
	Grassroots nontaxable amount	(enter 25	5% of line 1f)				
h	Subtract line 1g from line 1a. If	zero or le	ess, enter -0		[
i	Subtract line 1f from line 1c. If a	zero or le	ss, enter -0-		[
j	If there is an amount other th	an zero	on either I	ine 1h or line 1i, o	did the organiza	tion file Form 4720	
	reporting section 4911 tax for t	his year?					Yes No
				aging Period Under	· ·		
	(Some organizations tha			• •	-		nns below.
		See	the separat	te instructions for I	ines 2a through	2f.)	
		Lobk	ying Exper	nditures During 4-Ye	ear Averaging Pe	riod	I
	Calendar year (or fiscal year beginning in)	(a)	2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a	Lobbying nontaxable amount						
_ b	Lobbying ceiling amount (150% of line 2a, column (e))						
	: Total lobbying expenditures						
	Grassroots nontaxable amount						
e	Grassroots ceiling amount (150% of line 2d, column (e))						
f	Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2020

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44740U 702V V 20-7.6F PAGE 17 Schedule C (Form 990 or 990-EZ) 2020 Page 3

Par	II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T file	d For	m 576	8		
For	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(8	1)		(b)		
	ription of the lobbying activity.	Yes	No		Amou	ınt	
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:						
а	Volunteers?						
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.						
С	Media advertisements?						
d	Mailings to members, legislators, or the public?						
е	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 b	If "Yes," enter the amount of any tax incurred under section 4912						
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Par	Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ection	1		
	501(c)(6).					1	
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				2	X	
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from				3	^	X
_	III-B Complete if the organization is exempt under section 501(c)(4), section 501				Ţ		
ı uı	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No"		-			. is	
	answered "Yes."	· · · · · ·	,	·,		,	
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amo	unts	of				
	political expenses for which the section 527(f) tax was paid).						
а				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) du	es.		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portio	n of th	ne				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible I	obbyir	ng				
_	and political expenditure next year?			4			
5 Par	Taxable amount of lobbying and political expenditures (See instructions)			5			
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate	ed arou	ın list): Part	II-A. lir	nes 1	and
	e instructions); and Part II-B, line 1. Also, complete this part for any additional information.		.po.	,,	,		۵
-							

Schedule C (Form 990 or 990-EZ) 2020

Schedule C (Form 990 or 990-EZ) 2020

Part IV Supplemental Information (continued)

Schedule C (Form 990 or 990-EZ) 2020

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44740U 702V V 20-7.6F PAGE 19

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 Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number UNITED STATES TENNIS ASSOCIATION INCORPORATED 13-5459420 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes Nο Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes No Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2a 2b 2c Number of conservation easements on a certified historic structure included in (a) С Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: Revenue included on Form 990, Part VIII, line 1. ▶ \$

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

Schedule D (Form 990) 2020 Page **2**

Pa	rt III Organizations Maintaini	ng Collections of	Art, Histo	rical Tre	asures,	or Other	Similar Assets (d	continue	d)		
3	Using the organization's acquisition	on, accession, and	other recor	ds, check	c any of	the follow	ring that make sign	nificant us	se of its		
	collection items (check all that app	ly):									
а	Public exhibition		d	Loan	or exchan	ge progra	m				
b	Scholarly research		e	Other							
С	Preservation for future gene	rations									
4	Provide a description of the organ	nization's collection	s and expla	ain how t	hey furth	er the or	ganization's exemp	t purpose	in Part		
	XIII.										
5	During the year, did the organization	on solicit or receive	donations o	of art, histo	orical trea	sures, or	other similar				
	assets to be sold to raise funds rath		ained as pa	rt of the o	organizati	on's collec	ction?	Yes	No		
Pa	rt IV Escrow and Custodial A										
	Complete if the organiza	ation answered "Yo	es" on For	m 990, F	Part IV, lii	ne 9, or r	eported an amoui	nt on For	m		
	990, Part X, line 21.										
1 a	Is the organization an agent, trus										
	included on Form 990, Part X?							Yes	No		
b	If "Yes," explain the arrangement i	n Part XIII and com	plete the fo	llowing tab	ole:						
							Amount				
С	Beginning balance					С					
d	Additions during the year					d					
е	Distributions during the year					е					
f	Ending balance					f		1.4			
2a	Did the organization include an am	•	•	•			_	Yes	⊢ No		
	If "Yes," explain the arrangement i	n Part XIII. Check n	iere it the e	xpianation	nas beer	provided	on Part XIII		<u> </u>		
Pa	Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.										
	Complete ii the organiza	(a) Current year	(b) Prio			ears back	(d) Three years back	(a) Four v	ears back		
		,,	(6) 1 110	i yeai	(6) 1 110)	- Caro Daok	(u) Tillee years back	(e) i our y	ears back		
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains,										
	and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance	-f th		- (line 4 m		-// -					
2 a	Provide the estimated percentage Board designated or quasi-endown		%	e (iirie 1g,	Column (a	a)) neiu as	•				
b	Permanent endowment >	%									
c	Term endowment ▶	<u></u>									
	The percentages on lines 2a, 2b, a	and 2c should equal	100%.								
3a	Are there endowment funds not in			ation that	are held	and admir	nistered for the				
	organization by:	,	J					Y	es No		
	(i) Unrelated organizations							3a(i)			
	(ii) Related organizations							3a(ii)			
b	If "Yes" on line 3a(ii), are the relate	ed organizations liste	ed as require	ed on Sch	edule R?			3b			
4	Describe in Part XIII the intended u										
Pa	rt VI Land, Buildings, and Equ Complete if the organize	uipment.	'00" on Fa	m 000 '	Dort I\ / 1	ino 110 '	Soo Form 000 Da	rt V lin -	10		
	Description of property		r other basis		or other basis			III A, III IE I) Book valu			
			stment)		ther)		eciation	-, Book vaid			
1 a	Land										
b	Buildings			60.0	100 251	111 ^	00 700	40 ==	0.642		
С	Leasehold improvements				89,371		09,728.		$\frac{9,643}{0.000}$		
d	Equipment				348,768	I	08,366.		$\frac{0,402.}{0,666}$		
<u>e</u>	Other	(1) (000 5		14,396		73,730.		0,666.		
Гota	I. Add lines 1a through 1e. (Column	n (a) must equal For	m 990, Part	X, columi	n (B), line	10c.)	▶	/6,⊥6	0,711.		

Schedule D (Form 990) 2020			Page 3
Part VII Investments - Other Securities. Complete if the organization answered	d "Yes" on Form 990.	Part IV. line 11b. See Form 990. P	art X. line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market	:
(1) Financial derivatives		- Cook of one of your market	
(2) Closely held equity interests			
(3) Other			
(A) COMMON TRUST & PVT MUTUAL FUND	8,560,814.	FMV	
(B) ALTERNATIVE INVESTMENTS	48,881,131.	FMV	
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	57,441,945.		
Part VIII Investments - Program Related. Complete if the organization answered		Part IV line 11c See Form 990 P	art X line 13
(a) Description of investment	(b) Book value	(c) Method of valuation	
(a) Description of investment	(b) Book value	Cost or end-of-year market	
(1) CINCINNATI TENNIS	16,966,485.	COST	
(2) TRIDENTS LTD. LAVER CUP	4,127,211.	COST	
(3) CINCY TENNIS-SANCTION FEES	508,648.	COST	
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	21,602,344.		
Part IX Other Assets.	21,002,344.		
Complete if the organization answered	d "Yes" on Form 990.	Part IV. line 11d. See Form 990. P	art X. line 15.
	escription		(b) Book value
<u>(1)</u>	· · · · · · · · · · · · · · · · · · ·		
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
(7)			
(8)			
Total (Column (b) must equal Form 200, Part V, eq. (P)	lino 15 \		
Part X Other Liabilities. Complete if the organization answered			990, Part X,
line 25.		1	
	ption of liability		(b) Book value
(1) Federal income taxes (2) POST RETIREMENT BENEFITS			1,131,143.
(2) POST RETIREMENT BENEFITS (3) LONG TERM SCHOLARSHIPS PAYABLE			56,500.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) .		1,187,643.
a transfer of the control of the con		the state of the s	4 4

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 . JSA 0E1270 1.000 4474OU 702V Schedule D (Form 990) 2020 Schedule D (Form 990) 2020 Page 4

Part 2	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:		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
_	Add lines 4a and 4b	4c	
5 Part	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 Irn	
rait	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)	20	
е	Add lines 2a through 2d	2e 3	
3	Subtract line 2e from line 1	-	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII line 7h		
	investment expenses not included on Fermi 550, Fait Viii, line 75		
b C	Other (Describe in Part XIII.)	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5	
Part	XIII Supplemental Information.		
Provide	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 information of the complete this part to provide any additional information.	nation	•
SEE	PAGE 5		

Part XIII Supplemental Information (continued)

PART X, LINE 2:

UNITED STATES TENNIS ASSOCIATION INCORPORATED (THE "REPORTING ORGANIZATION") IS A NOT-FOR-PROFIT ORGANIZATIONS THAT ARE 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. USOS IS A SINGLE MEMBER LLC FOR WHICH USTA IS THE SINGLE MEMBER. USOS IS A DISREGARDED ENTITY AND IS NOT RECOGNIZED FOR TAX PURPOSES AS A SEPARATE ENTITY SEPARATE FROM USTA. AS SUCH, ITS INCOME AND EXPENSES ARE REPORTED AS PART OF USTA'S ANNUAL FILINGS. THE ORGANIZATION HAS FILED ALL APPLICABLE RETURNS WHEN REQUIRED. USTA'S SHARE OF INCOME TAXES FOR CINCY HAS BEEN PROVIDED, PURSUANT TO THE OPERATING AGREEMENT WITH THE OTHER MEMBERS OF THESE ORGANIZATIONS. FOR THE YEARS ENDED DECEMBER 31, 2020 AND 2019, THERE WERE NO INTEREST OR PENALTIES REQUIRED TO BE RECORDED OR DISCLOSED IN THE CONSOLIDATED FINANCIAL STATEMENTS. IN ADDITION, THE ORGANIZATION HAS NOT TAKEN AN UNSUBSTANTIATED TAX POSITION THAT WOULD REQUIRE PROVISION OF A LIABILITY. THE ORGANIZATION IS SUBJECT TO ROUTINE AUDITS BY TAXING AUTHORITIES. AS OF DECEMBER 31, 2020, THERE WERE NO EXAMINATIONS IN PROGRESS.

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

2020

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. ► Attach to Form 990.

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

Open to Public Inspection

Name of the organization						Employer identificat	ion number		
UNITED STATES TENNIS ASSOCIATION	NITED STATES TENNIS ASSOCIATION INCORPORATED								
Part I General Information on Grants an	d Assistanc	е				'			
 Does the organization maintain records to set the selection criteria used to award the grant in Part IV the organization's process. 	ts or assistand dures for mo	e? nitoring the use	of grant funds in th	e United States.			X Yes No		
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.									
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
(1) USTA/SOUTHERN SECTION									
5685 SPALDING DR. NORCROSS, GA 30092	58-1190935	501(C)(4)	11,825,030.				SECTION GRANT		
(2) USTA/MIDWEST SECTION									
1310 EAST 96TH STREET SUITE 100	23-7417933	501(C)(4)	5,715,253.				SECTION GRANT		
(3) USTA/TEXAS TENNIS ASSOCIATION									
8105 EXCHANGE DR. AUSTIN, TX 78754	74-2182392	501(C)(4)	3,760,006.				SECTION GRANT		
(4) USTA/EASTERN SECTION									
70 WEST RED OAK LANE 4TH FLOOR	13-5042070	501(C)(4)	3,548,175.				SECTION GRANT		
(5) USTA/NORTHERN CALIFORNIA									
1920 NORTH LOOP ROAD ALAMEDA, CA 94502	94-1057590	501(C)(3)	3,352,804.				SECTION GRANT		
(6) USTA/SOUTHERN CALIFORNIA									
PO BOX 240015 LOS ANGELES, CA 90024	95-1243600	501(C)(4)	3,223,922.				SECTION GRANT		
(7) USTA/FLORIDA SECTION									
12005 PERFORMANCE DRIVE ORLANDO, FL 32827	23-7161642	501(C)(4)	3,197,913.				SECTION GRANT		
(8) USTA/INTERMOUNTAIN TENNIS SEC									
9145 E. KENYON AVE. SUITE 201	84-0726651	501(C)(4)	2,996,782.				SECTION GRANT		
(9) USTA/MID-ATLANTIC SECTION INC.									
620 HERNDON PARKWAY SUITE 290	54-1472806	501(C)(3)	2,729,288.				SECTION GRANT		
(10) USTA/MIDDLE STATES									
PO BOX 987 VALLEY FORGE, PA 19482	23-1688212	501(C)(4)	2,507,742.				SECTION GRANT		
(11) USA TENNIS NEW ENGLAND									
110 TURNPIKE ROAD WESTBOROUGH, MA 01581	04-6006570	501(C)(4)	2,370,302.				PROGRAM GRANT		
(12) USTA/MISSOURI VALLEY SECTION									
4121 W. 83RD ST. STE 108	23-7416298	501(C)(4)	2,076,563.				SECTION 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 lis	ted in the line	1 table				.			

V 20-7.6F

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

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

2020

OMB No. 1545-0047

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

► Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization	Employer identificat	Employer identification number							
UNITED STATES TENNIS ASSOCIATION I	TED STATES TENNIS ASSOCIATION INCORPORATED								
Part I General Information on Grants and	d Assistanc	е				•			
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand dures for mor	e? nitoring the use	of grant funds in th	e United States.			X Yes No		
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the		_					'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 non- cash 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)	1,900,295.				SECTION GRANT		
(2) USTA/NORTHERN SECTION									
2685 VIKINGS CIRCLE STE. 100	41-1675510	501(C)(3)	1,365,775.				SECTION GRANT		
(3) USTA/SOUTHWEST SECTION									
7010 E. ACOMA DRIVE #201	85-0254477	501(C)(4)	1,236,667.				SECTION GRANT		
(4) USTA/CARIBBEAN SECTION									
PO BOX 190740 SAN JUAN, PR 00919	66-0413224	N/A	737,992.				SECTION GRANT		
(5) USTA HAWAII PACIFIC, INC.									
1888 KALAKAOA AVE. C309 HONOLULU, HI 96815	83-1926549	501(C)(3)	692,344.				SECTION GRANT		
(6) TENNIS INDUSTRY ASSOCIATION									
35 E. WACKER DRIVE STE. 850	51-0162283	501(C)(6)	414,750.				PROGRAM GRANT		
(7) USTA/HAWAII PACIFIC SECTION									
1888 KALAKAUA AVE. HONOLULU, HI 96815	23-7297012	501(C)(4)	209,726.				SECTION GRANT		
(8) UNITED STATES PROFESSIONAL TENNIS ASSOC. IN									
11961 PERFORMANCE DRIVE ORLANDO, FL 32827	74-1818176	501(C)(6)	150,000.				PROGRAM GRANT		
(9) TENNIS AND EDUCATION INC									
100 FEDERAL DRIVE ST. PAUL, MN 55111	41-1965977	501(C)(3)	85,000.				PROGRAM GRANT		
(10) RECREATION DISTRICT #14 OF ST. TAMMANY PARI									
13505 HIGHWAY 1085 COVINGTON, LA 70433	72-1468873	MUNICIPALITY	80,000.				PROGRAM GRANT		
(11) WESTERN SPRING PARK DISTRICT									
4400 CENTRAL AVENUE	36-6006150	MUNICIPALITY	60,000.				PROGRAM GRANT		
(12) CITY OF DOVER, NH SCHOOL DEPT.									
61 LOCUST STREET STE 409 DOVER, NH 03820	02-6000230	MUNICIPALITY	50,000.				PROGRAM GRANT		
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ble			.		
3 Enter total number of other organizations list	ted in the line	1 table							

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

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

2020

OMB No. 1545-0047

Open to Public

Inspection

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

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

Name of the organization Employer identification number UNITED STATES TENNIS ASSOCIATION INCORPORATED 13-5459420 **General Information on Grants and Assistance** 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and No the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) (g) Description of 1 (a) Name and address of organization (c) IRC section (d) Amount of cash (e) Amount of non-(b) EIN (h) Purpose of grant (if applicable) grant cash assistance noncash assistance or assistance or government (1) CITY OF SCOTTSDALE 7447 E. INDIAN SCHOOL ROAD STE 210 86-6000735 MUNICIPALITY 50,000. PROGRAM GRANT (2) GUAM NATIONAL TENNIS FEDERATION P.O. BOX 2312 HAGATNA GQ 96932 66-0514446 N/A 50,000. PROGRAM GRANT (3) ROSS INITIATIVE IN SPORTS FOR EQUALITY INC 423 W 55TH STREET NEW YORK, NY 10019 47-4225769 50,000. 501(C)(3) PROGRAM GRANT (4) TOWN OF HUNTERSVILLE 56-6001252 P.O. BOX 664 HUNTERVILLE, NC 28070 GOVERNMENT 50,000. PROGRAM GRANT (5) WTA CHARITIES INC. 100 SECOND AVENUE SOUTH 81-3707788 501(C)(3) 50,000. PROGRAM GRANT (6) GATEWAY CONFLUENCE WHEELCHAIR SPORTS FDN 402 W. OAK STREET MILLSTADT, IL 62260 37-1380800 501(C)(3) 47,875 PROGRAM GRANT (7) DON'T EVER GIVE UP INC. 14600 WESTON PARKWAY CARY, NC 27513 47-5304184 501(C)(3) 40,000. PROGRAM GRANT (8) INTERNATIONAL TENNIS HALL OF FAME 194 BELLEVUE AVE. NEWPORT, RI 02840 13-6144356 501(C)(3) 40,000. PROGRAM GRANT (9) TOWN OF HILTON HEAD ISLAND 1 TOWN CENTER COURT 57-0752325 MUNICIPALITY 40,000. PROGRAM GRANT (10) CITY OF RALEIGH PO BOX 590 RALEIGH, NC 27602 56-6000236 GOVERNMENT 38,500. PROGRAM GRANT (11) HARLEM JUNIOR TENNIS & EDUC. PROGRAM INC 13-3076419 501(C)(3) 37,500. 40 WEST 143RD STREET NEW YORK, NY 10037 PROGRAM GRANT (12) LAKE NONA INSTITUTE INC. 6900 TAVISTOCK LAKES BLVD SUITE 200 27-3346737 501(C)(3) 35,000. PROGRAM GRANT 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

Schedule I (Form 990) 2020

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

2020

OMB No. 1545-0047

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.

Open to Public Inspection Employer identification number

UNITED STATES TENNIS ASSOCIATION	INCORPORA	ГED				13-545942	20				
Part I General Information on Grants a	nd Assistanc	e				_					
Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?											
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.											
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance				
(1) ST. JAMES PUBLIC SCHOOLS											
500 3RD AVENUE SOUTH/ PO BOX 509	41-6004625	EDUCATIONAL INS	35,000.				PROGRAM GRANT				
(2) CITY OF LA DEPT OF RECREATION & PARKS											
221 N. FIGUEROA LOS ANGELES, CA 90012	95-6000735	MUNICIPALITY	34,000.				PROGRAM GRANT				
(3) CITY OF SHREVEPORT											
505 TRAVIS STREET, SHREVEPORT, LA 71101	72-6001326	GOVERNMENT	30,000.				PROGRAM GRANT				
(4) CITY OF WAUKON											
101 ALLAMAKEE STREET WAUKON, IA 52172	42-6005340	MUNICIPALITY	30,000.				PROGRAM GRANT				
(5) FIRST SERVE MIAMI INC											
12231 SW 129 COURT MIAMI, FL 33186	59-1603794	501(C)(3)	30,000.				PROGRAM GRANT				
(6) MACON BIBB COUNTY											
700 POPLAR STREET MACON, GA 31201	46-3992371	GOVERNMENT	30,000.				PROGRAM GRANT				
(7) NIRSA FOUNDATION											
4185 SW RESEARCH WAY CORVALLIS, OR 97333	93-1090612	501(C)(3)	30,000.				PROGRAM GRANT				
(8) OKLAHOMA STATE UNIVERSITY FOUNDATION											
400 SOUTH MONROE STILLWATER, OK 74074	73-6097060	501(C)(3)	30,000.				PROGRAM GRANT				
(9) SIOUXLAND TENNIS ASSOCIATION INC.											
PO BOX 1242 SOUTH SIOUX CITY, NE 68776	47-4084724	501(C)(3)	30,000.				PROGRAM GRANT				
(10) SOUTH ATLANTA CTA											
6320 COLONIAL VIEW FAIRBURN, GA 30213	58-1885686	501(C)(3)	30,000.				PROGRAM GRANT				
(11) SOUTHEAST TENNIS & LEARNING CENTER											
701 MISSISSIPPI AVENUE SW	52-1939752	501(C)(3)	30,000.				PROGRAM GRANT				
(12) TOWN OF KNIGHTDALE											
950 STEEPLE SQUARE COURT	56-0789285	MUNICIPALITY	30,000.				PROGRAM GRANT				
2 Enter total number of section 501(c)(3) and	d government	organizations list	ed in the line 1 tak	ole							
3 Enter total number of other organizations li	sted in the line	1 table	<u> </u>	<u> </u>	<u>.</u>	<u> </u>					

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

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

2020

OMB No. 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identificat	ion number	
UNITED STATES TENNIS ASSOCIATION I	NITED STATES TENNIS ASSOCIATION INCORPORATED							
Part I General Information on Grants and	d Assistanc	е				'		
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced Part II Grants and Other Assistance to D 	s or assistand dures for mor	e? nitoring the use	of grant funds in th	e United States.			X Yes No	
Part IV, line 21, for any recipient the		_					,	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
(1) ZINA GARRISON TENNIS ACADEMY								
1333 OLD SPANISH TRAIL STE. G #175	76-0371254	501(C)(3)	30,000.				PROGRAM GRANT	
(2) RANDY ROSS TENNIS ENTERPRISES LLC								
10664 W TURTLE MTN LITTLETON, CO 80127	45-4221527	N/A	30,000.				FACILITY FUNDING	
(3) NANCY LIEBERMAN CHARITIES - DREAM TEAM								
5756 QUEBEC LANE PLANO, TX 75024	36-4642743	501(C)(3)	27,000.				PROGRAM GRANT	
(4) CITY OF ROME								
PO BOX 1433 ROME, GA 30162	58-6000653	MUNICIPALITY	26,000.				PROGRAM GRANT	
(5) CITY OF GONZALES								
120 S. IRMA BLVD. GONZALES, LA 70737	72-6000483	MUNICIPALITY	25,000.				PROGRAM GRANT	
(6) PHIT WORLD FOUNDATION								
1032 15TH ST NW #108 WASHINGTON, DC 20005	46-3861749	501(C)(3)	25,000.				PROGRAM GRANT	
(7) BATON ROUGE WHEELCHAIR TA								
19037 EPERNAY COURT BATON ROUGE, LA 70817	58-1934935	501(C)(3)	23,000.				PROGRAM GRANT	
(8) BALBOA TENNIS CLUB								
2221 MORLEY FIELD DRIVE SAN DIEGO, CA 92104	95-6096518	501(C)(4)	22,500.				PROGRAM GRANT	
(9) CITY OF DAYTONA BEACH SHORES								
2990 S. ATLANTIC AVENUE	59-6044103	MUNICIPALITY	20,000.				PROGRAM GRANT	
(10) CITY OF HUBER HEIGHTS								
6131 TAYLORSVILLE ROAD	31-6000621	MUNICIPALITY	20,000.				PROGRAM GRANT	
(11) CITY OF NORTH RICHLAND HILLS								
4301 CITY POINT DRIVE	75-6005194	MUNICIPALITY	20,000.				PROGRAM GRANT	
(12) GREATER MIDLAND COMMUNITY CENTER, INC.								
2205 JEFFERSON AVE. MIDLAND, MI 48640	38-1534400	501(C)(3)	20,000.				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	<u> </u>		<u>.</u>	<u> </u>		

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

Internal Revenue Service

Name of the organization

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

2020

Open to Public

OMB No. 1545-0047

Department of the Treasury

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

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Inspection

Employer identification number

UNITED STATES TENNIS ASSOCIATION INCORPORATED 13-5459420 **General Information on Grants and Assistance** 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and No the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) (g) Description of (c) IRC section (d) Amount of cash (e) Amount of non-1 (a) Name and address of organization (b) EIN (h) Purpose of grant (if applicable) grant cash assistance noncash assistance or assistance or government (1) NORWALK GRASSROOTS TENNIS INC 11 INGALLS AVENUE NORWALK, CT 06854 06-1570097 501(C)(3) 20,000. (2) RICK MACCI ACADEMY INC 19760 STRIKER CIR BOCA RATON, FL 33498 65-1105733 EDUCATIONAL INS 20,000. PROGRAM GRANT (3) ITF STEERING COMMITTEE INVESTMENT 99-9999999 20,000. BANK LANE, ROEHAMPTON LONDON UK SW15 5XZ N/A PROGRAM GRANT (4) KENWOOD ISLE TENNIS ASSOCIATION 1955 KENWOOD PARKWAY MINNEAPOLIS, MN 55405 81-0657863 501(C)(3) 17,500. PROGRAM GRANT (5) CITY OF APOPKA 120 E. MAIN STREET APOPKA, FL 32703 59-6000265 MUNICIPALITY 17,400. PROGRAM GRANT (6) MANKATO AREA PUBLIC SCHOOL EDUCATIONAL INS PO BOX 8741-10 CIVIC CENTER PLAZA STE ONE 41-6000310 15,500. PROGRAM GRANT (7) APEX RACKET AND FITNESS 2445 CONGRESS STREET PORTLAND, ME 04102 47-3604930 NI/A 15,200. FACTLITY SUPPORT (8) ARKANSAS TENNIS ASSOCIATION 2024 ARKANSAS VALLEY SUITE 302 23-7372183 501(C)(4) 15,000. PROGRAM GRANT (9) BELTON TENNIS ASSOCIATION PO BOX 274 BELTON, SC 29627 57-6028470 501(C)(3) 15,000. PROGRAM GRANT (10) CITY OF GERMANTOWN 1 N. PLUM STREET GERMANTOWN, OH 45327 31-6001047 MUNICIPALITY 15,000. PROGRAM GRANT (11) MARCH OF DIMES GREATER NY 77-0395654 501(C)(3) 15,000. BULEVAR MIHAILA PUPINA 10 A PROGRAM GRANT (12) ORANGEFIELD INDEPENDENT SCHOOL DISTRICT PO BOX 228 ORANGEFIELD, TX 77639 74-6001839 EDUCATIONAL INS 15,000. PROGRAM GRANT 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

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

2020

OMB No. 1545-0047

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Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identificat	ion number
UNITED STATES TENNIS ASSOCIATION	INCORPORA'	ΓED				13-545942	20
Part I General Information on Grants an	d Assistanc	е				•	
 Does the organization maintain records to s the selection criteria used to award the gran Describe in Part IV the organization's proce 	ts or assistand	e?					X Yes No
Part IV, line 21, for any recipient t		_			additional space is n		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 non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) THE PROUT SCHOOL							
4640 TOWER HILL ROAD WAKEFIELD, RI 02879	05-0319920	EDUCATIONAL INS	15,000.				PROGRAM GRANT
(2) NEVADA TENNIS ASSOCIATION							
8550 WEST DESERT INN RD. STE 102-174	23-7027028	501(C)(3)	14,500.				PROGRAM GRANT
(3) ARKANSAS CITY RECREATION COMMISSION							
225 E 5TH AVENUE ARKANSAS CITY, KS 67005	48-6099908	MUNICIPALITY	14,000.				PROGRAM GRANT
(4) ARTHUR ASHE INSTITUTE FOR URBAN HEALTH							
450 CLARKSON AVENUE BROOKLYN, NY 11203	11-3185372	501(C)(3)	13,936.				PROGRAM GRANT
(5) USTA/NORTH CAROLINA							
2709 HENRY STREET GREENSBORO, NC 27405	56-1121513	501(C)(4)	13,250.				SECTION GRANT
(6) PEACHTREE CITY TENNIS CENTER							COLLEGIATE COURT
10 PANTERRA WAY PEACHTREE CITY, GA 30269	27-0428548	N/A	13,250.				TECH GRANT
(7) CITY OF LAUREL							
401 N. 5TH AVENUE LAUREL, MS 39440	64-6000579	MUNICIPALITY	12,000.				PROGRAM GRANT
(8) PROFESSIONAL TENNIS REGISTRY, INC.							
PO BOX 4739 HILTON HEAD, SC 29938	57-0795565	501(C)(6)	11,000.				PROGRAM GRANT
(9) BIOLA UNIVERSITY							
13800 BIOLA AVE. LA MIRADA, CA 90639	95-0549600	501(C)(3)	10,000.				PROGRAM GRANT
10) CITY OF CROSSLAKE							
37028 COUNTY ROAD 66 CROSSLAKE, MN 56442	41-6005624	MUNICIPALITY	10,000.				PROGRAM GRANT
(11) CITY OF NOGALES							
777 N. GRAND AVE. NOGALES, AZ 85621	86-6000254	MUNICIPALITY	10,000.				PROGRAM GRANT
(12) CITY OF WILMINGTON							
PO BOX 1810 WILMINGTON, NC 28402	56-6000239	MUNICIPALITY	10,000.				PROGRAM GRANT
2 Enter total number of section 501(c)(3) and	government	organizations lis	ted in the line 1 tal	ole			
3 Enter total number of other organizations lis	ted in the line	1 table					

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

Schedule I (Form 990) 2020

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PAGE 31 V 20-7.6F

Internal Revenue Service

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

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

2020

OMB No. 1545-0047

Department of the Treasury

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Open to Public Inspection

Name of the organization Employer identification number UNITED STATES TENNIS ASSOCIATION INCORPORATED 13-5459420 **General Information on Grants and Assistance** 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and No the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) (g) Description of 1 (a) Name and address of organization (c) IRC section (d) Amount of cash (e) Amount of non-(b) EIN (h) Purpose of grant (if applicable) grant cash assistance noncash assistance or assistance or government (1) INSTITUTE FOR SPORT & SOCIAL JUSTICE INC 4000 CENTRAL FLORIDA BLVD. 47-5127394 501(C)(3) 10,000. PROGRAM GRANT (2) MIDDLE TENNESSEE STATE UNIVERSITY 1301 EAST MAIN STREET 62-6005794 EDUCATIONAL INS 10,000. PROGRAM GRANT (3) OCONEE COUNTY BOARD OF COMMISSIONERS 58-6000871 GOVERNMENT 10,000. PO BOX 1527 WATKINSVILLE, GA 30677 PROGRAM GRANT (4) THE ONE LOVE FOUNDATION 27-2904497 44 PONDFIELD ROAD SUITE 12 501(C)(3) 10,000. PROGRAM GRANT (5) UNIVERSITY OF WYOMING 1000 E UNIVERSITY AVE LARAMIE, WY 82071 83-6000331 501(C)(1) 10,000. PROGRAM GRANT (6) WAKE FOREST UNIVERSITY 1834 WAKE FOREST ROAD 56-0532138 501(C)(3) 10,000. PROGRAM GRANT (7) YMCA OF FLORIDA'S FIRST COAST 40 EAST ADAMS STREET, SUITE 210 59-0638514 501(C)(3) 10,000. PROGRAM GRANT (8) G R RACQUET AND FITNESS LLC COLLEGIATE COURT 4940 PLAINFIELD AVE NE 82-3270939 N / A 10,000. TECH GRANT (9) CITY OF ROSWELL 38 HILL STREET SUITE 130 ROSWELL, GA 30075 58-6000655 MUNICIPALITY 8,500 PROGRAM GRANT (10) POK RESORT LLC 201 MARINA WAY/ PO BOX 279 83-2054962 N/A 8,500 FACILITY FUNDING (11) USTA FOUNDATION INC. 13-3782331 501(C)(3) 8,000 70 WEST RED OAK LANE WHITE PLAINS, NY 10604 SECTION GRANT (12) CENTRAL FLORIDA SPORTS COMMISSION, INC 400 W. CHURCH STREET ORLANDO, FL 32801 59-3152788 501(C)(3) 7,500 PROGRAM GRANT 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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Internal Revenue Service

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

2020

OMB No. 1545-0047

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Open to Public Inspection

Name of the organization Employer identification number UNITED STATES TENNIS ASSOCIATION INCORPORATED 13-5459420 **General Information on Grants and Assistance** 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and No the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) (g) Description of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(h) Purpose of grant (if applicable) grant cash assistance noncash assistance or assistance or government (1) SOUTHERN ARIZONA ADAPTIVE SPORTS 2610 E CROYDEN STREET TUCSON, AZ 85716 82-1289116 501(C)(3) 7,435. PROGRAM GRANT (2) OHIO NORTHERN UNIVERSITY 525 SOUTH MAIN STREET ADA, OH 45810 34-4429091 501(C)(3) 7,400. PROGRAM GRANT (3) UNIVERSITY OF HOUSTON SYSTEM 5000 GULF FWY BLDG 1 ROOM 109 74-6001399 EDUCATIONAL INS 7,400. PROGRAM GRANT (4) 2 BOUNCE TENNIS, INC. 36915 COOK STREET STE. 101 46-2662957 501(C)(3) 7,000 PROGRAM GRANT (5) ADAPTIVE ATHLETICS UNIV. OF ARIZONA CLUB SP 1224 E LOWELL ST TUCSON, AZ 85721 32-0295267 EDUCATIONAL INS 7,000 PROGRAM GRANT (6) UTAH TENNIS ASSOCIATION 2469 E FORT UNION BLVD. STE 104 87-0335459 501(C)(4) 7,000 PROGRAM GRANT (7) WICHITA ADAPTIVE SPORTS 3033 WEST 2ND STREET WICHITA, KS 67203 48-0892678 501(C)(3) 7,000 PROGRAM GRANT (8) ONE LOVE TENNIS, LLC. 5700 CHATHAM CIRCLE NORCROSS, GA 30071 58-2527445 7,000 SUPPORT EVENT (9) METRO TENNIS ASSOCIATES INC 6594 WHITE MILL RD FAIRBURN, GA 30213 58-1400689 N/A 6,000 PROGRAM GRANT (10) MOBILE AREA TENNIS ASSOCIATION INC 851 GAILLARD DRIVE MOBILE, AL 36608 20-0116253 501(C)(4) 6,000 PROGRAM GRANT (11) MARY FREE BED HOSPITAL & REHABILITATION CEN 38-1359265 501(C)(3) 5,875 235 WEALTHY STREET SE PROGRAM GRANT (12) MALIVAI WASHINGTON KIDS FDN INC. 1096 WEST 6TH STREET JACKSONVILLE, FL 32209 59-3559150 501(C)(3) 5,500 PROGRAM GRANT 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

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

2020

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

Name of the organization						Employer identificati	on number
UNITED STATES TENNIS ASSOCIATION	INCORPORA	ΓED				13-545942	0
Part I General Information on Grants a	nd Assistanc	е				'	
 Does the organization maintain records to the selection criteria used to award the gra Describe in Part IV the organization's process Part II Grants and Other Assistance to 	ants or assistand edures for mor	e? nitoring the use	of grant funds in th	e United States.			X Yes No
Part IV, line 21, for any recipient		•					es on rolli 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
_(1) NYJUNIOR TENNIS LEAGUE							
36-36 33RD STREET STE 504	23-7442256	501(C)(3)	5,500.				PROGRAM GRANT
(2)							
(3)							
(4)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) an							70.
3 Enter total number of other organizations I	isted in the line	1 table				<u> </u>	39.

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

Schedule I (Form 990) 2020

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Schedule I (Form 990) (2020)

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	2.	3,900.			
		·			
2 MULTICULTURAL GRANT	42.	31,750.			
3 OFFICIALS TRAINING & SCHOOLS	1.	2,000.			
4 SR. INT'L PLAY GRANT	25.	23,000.			
5 WHEELCHAIR GRANT	5.	6,175.			
6 ZONAL COMPETITION GRANTS	9.	13,000.			
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 PROJECTS REQUIRING RECONSTRUCTION OR NEW CONSTRUCTION OF A FACILITY. IF

Schedule I (Form 990) (2020)

Schedule I (Form 990) (2020)

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					
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.

AWARDED, PRIOR TO RECEIVING THEIR FUNDS, FACILITY GRANT RECIPIENTS ARE

REQUIRED TO SUBMIT AN ACCOUNTABILITY FORM THAT IS REVIEWED BY STAFF

AND/OR USTA CONSULTANTS TO ENSURE THE PROJECT HAS BEEN COMPLETED AS

APPROVED. THE ACCOUNTABILITY PROCESS REQUIRES GRANTEES TO SUBMIT FISCAL

AND NARRATIVE END-OF-PROJECT REPORTS DETAILING THE RESULTS OF THEIR

PROJECTS. RECIPIENTS OF TOURNAMENT/CHAMPIONSHIP GRANTS ARE REQUIRED TO

SUBMIT REPORTS FOLLOWING THE COMPLETION OF THEIR EVENTS DETAILING THE

RESULTS OF THE EVENTS AND ALL EXPENDITURES.

Schedule I (Form 990) (2020)

Compensation Information

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

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

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

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number 13-5459420

Part	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	X	
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 Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
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		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	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		1

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

Schedule J (Form 990) 2020 Page 2

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.

		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation (iii) Other reportable compensation		other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
MICHAEL DOWSE (FROM 1/2	(i)	842,534.	0.	16,558.	8,550.	37,002.	904,644.	0.	
1 EXECUTIVE DIRECTOR & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
ANDREA HIRSCH	(i)	659,323.	281,758.	3,583.	8,550.	12,883.	966,097.	0.	
2 ^{CAO & GENERAL COUNSEL}	(ii)	0.	0.	0.	0.	0.	0.	0.	
EDWARD NEPPL	(i)	486,502.	203,839.	414.	8,550.	31,515.	730,820.	0.	
3CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
GORDON A. SMITH	(i)	57,033.	471,030.	228,703.	0.	0.	756,766.	228,703.	
FORMER CEO & EXECUTIVE DIR.	(ii)	0.	0.	0.	0.	0.	0.	0.	
LEWIS SHERR	(i)	681,329.	670,801.	25,098.	8,550.	34,745.	1,420,523.	0.	
5 ^{CHIEF} REVENUE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
STACEY MILKOVICH	(i)	620,831.	252,112.	774.	8,550.	37,495.	919,762.	0.	
6CHIEF EXECUTIVE, PRO TENNIS	(ii)	0.	0.	0.	0.	0.	0.	0.	
KURT KAMPERMAN	(i)	488,254.	163,351.	3,756.	8,550.	31,515.	695,426.	0.	
7 ^{CHIEF} EXEC., NATIONAL CAMPUS	(ii)	0.	0.	0.	0.	0.	0.	0.	
CRAIG MORRIS	(i)	445,779.	212,975.	430.	8,550.	37,495.	705,229.	0.	
8CHIEF EXEC., COMM TENNIS&YOUTH	(ii)	0.	0.	0.	0.	0.	0.	0.	
AMY WESLY	(i)	478,507.	188,086.	270.	8,550.	39,737.	715,150.	0.	
9 ^{CHIEF} MARKETING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
PAUL MAYA		382,734.	129,960.	44,290.	8,550.	37,495.	603,029.	0.	
10 ^{CHIEF} TECHNOLOGY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
CHRISTIAN WIDMAIER	(i)	326,254.	109,853.	1,188.	8,550.	37,495.	483,340.	0.	
11 MANAGING DIR. CORP. COMMUNICAT	(ii)	0.	0.	0.	0.	0.	0.	0.	
STACIELLEN MISCHEL	(i)	303,709.	109,235.	774.	8,550.	31,515.	453,783.	0.	
12 ASSOC. GEN. COUNSEL & DEP. CLO	(ii)	0.	0.	0.	0.	0.	0.	0.	
DARIO ROY OTERO	(i)	295,803.	105,275.	1,188.	9,728.	37,426.	449,420.	0.	
13 ^{CHIEF} PRO. TENNIS OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
14	(ii)								
	(i)								
_15	(ii)								
	(i)								
16	(ii)								

Schedule J (Form 990) 2020

44740U 702V V 20-7.6F

Schedule J (Form 990) 2020 Page 3

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 J (Form 990) 2020

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

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

UNITED STATES TENNIS ASSOCIATION INCORPORATED

13-5459420

Employer identification number

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 THE 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. IN 2020, THE USTA FACED UNPRECEDENTED CHALLENGES TO HOSTING THE EVENT DUE TO THE COVID-19 PANDEMIC. ULTIMATELY, THE EVENT WAS CONDUCTED AND WAS BROUGHT TO A SUCCESFUL CONCLUSION IN A HEALTHY AND SAFE MANNER. HOWEVER, TO ACHIEVE THIS GOAL THE 2020 WAS CONDUCTED WITHOUT FANS ON-SITE FOR THE FIRST TIME IN ITS HISTORY.

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

THE GAME, PLAY THE GAME, AND TAKE ADVANTAGE OF ITS MANY HEALTH, FITNESS,

AND SOCIAL BENEFITS. IT IS THE GOAL OF COMMUNITY TENNIS TO HELP PEOPLE

FIND THEMSELVES IN THE GAME AT EVERY STEP ALONG THE PLAY PATHWAY. NET

GENERATION IS THE OFFICIAL YOUTH TENNIS BRAND OF THE USTA, EMBRACING ALL

ASPECTS OF YOUTH PLAY FOR KIDS AGES 5 TO 18, WITH MORE THAN 456,000

PLAYERS AND PARENTS CONNECTING TO THE USTA VIA NET GENERATOIN.

IN 2020 THE USTA'S COMMUNITY TENNIS GROUP MARSHALLED THE ENTIRE TENNIS COMMUNITY TO ENSURE THAT THE SPORT OF TENNIS WEATHERED THE TENNIS PANDEMIC. THROUGH A SERIES OF PROGRAMS, GRANTS AND ADVOCACY ACTIONS TENNIS NOT ONLY SURVIVED, BUT THRIVED. THE SPORT SAW A 22% GROWTH IN PARTICIPATION OVER 2019, WITH FOUR MILLION NEW AND RETURNING PLAYERS PLAYING THE SPORT. 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 THOUSANDS OF LOCAL VOLUNTEERS NATIONWIDE AND WITH TENNIS INDUSTRY PARTNERS ON NUMEROUS GRASS-ROOTS EFFORTS TO GROW THE GAME. IN THE PAST SEVERAL YEARS, THE USTA HAS HELPED BUILD AND RENOVATE MORE THAN 41,500 PUBLIC TENNIS COURTS. OTHER INITIATIVES INCLUDE DEVELOPING, STRENGTHENING, AND GROWING A NATIONWIDE NETWORK OF SELF-SUFFICIENT COMMUNITY TENNIS ASSOCIATIONS TO INCREASE TENNIS PARTICIPATION AT THE LOCAL LEVEL; PROMOTING AND PROVIDING DEVELOPMENT AND PLAY OPPORTUNITIES FOR PEOPLE IN WHEELCHAIRS TO BE INVOLVED IN THE SPORT

UNITED STATES TENNIS ASSOCIATION INCORPORATED

OF TENNIS AS BOTH PLAYERS AND VOLUNTEERS; INTRODUCING TENNIS TO YOUTH THROUGH IN SCHOOL PHYSICAL EDUCATION CLASSES AND AFTER-SCHOOL TENNIS PROGRAMS; AND PROMOTING AND PROVIDING RECREATIONAL AND COMPETITIVE LEAGUE TEAM OPPORTUNITIES FOR PLAYERS AGE 18 TO 90+ IN THE COUNTRY'S LARGEST RECREATIONAL TENNIS LEAGUE, USTA LEAGUE. COMMUNITY TENNIS IS BASED AT THE USTA NATIONAL CAMPUS AT LAKE NONA IN ORLANDO, FLA., WHICH SERVES THE SPORT AT EVERY LEVEL OF PLAY AND DELIVERS AN UNPARALLELED TENNIS EXPERIENCE FOR PLAYERS OF ALL AGES AND ABILITY LEVELS. THE FACILITY HAS 100 TENNIS COURTS AND IS DIVIDED INTO DEDICATED AREAS THAT FOCUS ON THE COMPLETE TENNIS PATHWAY.

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 FED CUP, AND THE USTA PRO CIRCUIT. TOGETHER, THEY MANAGE THE GAME AT THE HIGHEST LEVELS IN THE UNITED STATES, WITH AN EYE TOWARD PROVIDING A MANAGEABLE PATHWAY TO THE ELITE LEVELS OF TENNIS COMPETITION FOR ASPIRING PRO TENNIS PLAYERS AND OFFICIALS. THE ACTIVITIES MANAGED BY THE PROFESSIONAL TENNIS OPERATIONS DIVISION REPRESENT TENNIS COMPETITION FOR ATHLETES AT ITS ULTIMATE LEVEL. THE EVENTS STAGED BY THE DIVISION ARE LEVERAGED TO SHOWCASE THE FUN, EXCITEMENT, AND ATHLETIC EXCELLENCE OF THE SPORT AND TO ENCOURAGE PARTICIPATION AT ALL LEVELS. AS THE RECOGNIZED NATIONAL GOVERNING BODY OF THE SPORT OF TENNIS, THE USTA IS A MEMBER OF THE U.S. OLYMPIC COMMITTEE. THE USTA COORDINATES THE UNITED STATES' TENNIS PARTICIPATION IN THE OLYMPIC GAMES AND THE PARALYMPIC GAMES, AS WELL AS

V 20-7.6F PAGE 42 THE PAN-AMERICAN GAMES. DAVIS CUP AND FED CUP ARE THE ELITE INTERNATIONAL TEAM COMPETITIONS IN PROFESSIONAL TENNIS FOR MEN AND WOMEN, RESPECTIVELY, WITH MORE THAN 130 NATIONS COMPETING IN THESE EVENTS ANNUALLY. THE UNITED STATES HAS WON THE DAVIS CUP CHAMPIONSHIP ON 32 OCCASIONS, MORE THAN ANY OTHER NATION, WHILE THE UNITED STATES 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 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 THEIR GEOGRAPHIC AREA. THE VOTING MEMBERS APPROVE THE SLATE OF OFFICERS AND BOARD MEMBERS AS SUBMITTED BY THE NOMINATING COMMITTEE. IN ADDITION, THEIR RIGHTS INCLUDE APPROVING AMENDMENTS TO THE BY-LAWS AND OTHER VOTING RIGHTS PURSUANT TO NEW YORK STATE NOT-FOR-PROFIT CORPORATION LAW.

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

FORM 990 WAS PREPARED BY A NATIONALLY RENOWNED ACCOUNTING FIRM IN

CONJUNCTION WITH THE ORGANIZATION'S FINANCIAL DEPARTMENT. THE FORM 990 IS

REVIEWED BY USTA'S LEGAL DEPARTMENT, AUDIT COMMITTEE AND IS ALSO

DISTRIBUTED TO THE FULL BOARD OF DIRECTORS PRIOR TO FILING WITH THE

INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

USTA HAS A CONFLICT OF INTEREST AND DISCLOSURE POLICY THAT APPLIES TO ALL EMPLOYEES, NATIONAL VOLUNTEERS AND BOARD MEMBERS. THE CONFLICT OF INTEREST AND DISCLOSURE POLICY REQUIRES AN EMPLOYEE, NATIONAL VOLUNTEER AND BOARD MEMBER TO REPORT INTERESTS OR RELATIONSHIPS THAT COULD PRESENT A POTENTIAL CONFLICT OF INTEREST. THE USTA OBTAINS ANNUAL CERTIFICATIONS FROM EMPLOYEES, NATIONAL VOLUNTEERS AND BOARD MEMBERS. THE ETHICS OFFICER REVIEWS THE COMPLETED DISCLOSURE STATEMENTS FOR EMPLOYEES AND THE AUDIT COMMITTEE REVIEWS THE COMPLETED DISCLOSURE STATEMENTS FOR THE VOLUNTEERS AT THE NATIONAL GOVERNING BODY LEVEL AND BOARD MEMBERS. THE ETHICS OFFICER AND THE CHAIR OF THE AUDIT COMMITTEE HAVE THE DISCRETION TO SHARE THE DISCLOSURE STATEMENTS WITH THE BOARD OF DIRECTORS AND/OR THE EXECUTIVE DIRECTOR & CHIEF OPERATING OFFICER AND/OR THE CHAIR OF THE

Name of the organization
UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number
13-5459420

RESPECTIVE NATIONAL COMMITTEE. THE 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, DELIBERATING AND DECIDING ISSUES AND/OR IN TRANSACTIONS).

FORM 990, PART VI, SECTION B, LINES 15A AND 15B:

THE COMPENSATION COMMITTEE HAS RESPONSIBILITY FOR ESTABLISHING A

COMPENSATION STRATEGY AND SETTING THE COMPENSATION OF THE 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

ADMINISTRATIVE OFFICER AND GENERAL COUNSEL; THE CHIEF FINANCIAL OFFICER;

CHIEF EXECUTIVE, PRO TENIS; THE CHIEF EXECUTIVE, COMMUNITY TENNIS; THE

CHIEF REVENUE OFFICER; THE CHIEF MARKETING 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

Name of the organization
UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

ABOVE WAS CONDUCTED, WITH RESPECT TO COMPENSATION FOR THE ABOVE-NOTED INDIVIDUALS, IN 2020.

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

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

ATTACHMENT 1

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 500,000 INDIVIDUAL MEMBERS, 7,000 ORGANIZATIONAL MEMBERS AND A PROFESSIONAL STAFF AND VOLUNTEERS DEDICATED TO GROWING THE GAME.

44740U 702V V 20-7.6F PAGE 46

Name of the organization	Employer identification number					
UNITED STATES TENNIS ASSOCIATION INCORPORATED	13-5459420					
атта Симент 2						

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
EPAM SYSTEMS, INC. 41 UNIVERSITY DRIVE NEWTON, PA 18940	SOFTWARE DEVELOPMENT	4,120,575.
HORIZON MEDIA, INC. DBA EDEN ROAD TRADING NEW YORK, NY 10013	MEDIA ENGAGEMENT	2,794,322.
CLUBSPARK, INC. 200 SOUTH ORANGE AVENUE ORLANDO, FL 32801	CONSULTANT	2,180,000.
HAWK EYE INNOVATIONS LTD. AMERICA LLC PARAMUS, NJ 07652	SPORTS TECH. SVCS	1,555,291.
SMT/IDS 10275 CENTURION COURT JACKSONVILLE, FL 32256	STATISTICS SERVICES	1,488,725.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

 \blacktriangleright 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

2020

Open to Public Inspection

Name of the organization
UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

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

Name, address, and EIN	(a) (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					
70 W RED OAK LANE	WHITE PLAINS, NY 10604	TENNIS	DE	141,152.	0.	USTA
(2)						
(3)						
(4)						
(5)						
(6)						
		1				

Part II 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		12(b)(13) olled
						Yes	No
(1) USTA NATIONAL TENNIS CENTER, INC. 13-2946690							
70 W RED OAK LANE WHITE PLAINS, NY 10604	TENNIS	NY	501(C)(3)	10	USTA		X
(2) USTA FOUNDATION, INC. 13-3782331							
70 W RED OAK LANE WHITE PLAINS, NY 10604	GRANT GIVING	NY	501(C)(3)	7	USTA		X
(3) USTA PLAYER DEVELOPMENT, INC. 27-1368195							
70 W RED OAK LANE WHITE PLAINS, NY 10604	YOUTH DEVELOP	NY	501(C)(3)	12A	USTA		X
(4)							
_(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2020

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V 20-7.6F

PAGE 48

Schedule R (Form 990) 2020 Page 2

Part III	Identification of Relative	ted Organizations	Taxabl	e as a Partners	hip. Complete if the	organization a	nswered "Yes"	on Form	n 990, Part IV,	line 34,	
r ai t iii	because it had one or	more related orga	anizatior	is treated as a p	partnership during the	e tax year.					
											_

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets	Disprop	h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	i) eral or aging ner?	(k) Percentage ownership
		,,,		,			Yes	No		Yes	No	
(1) CINCINNATI TENNIS 26-4273680												
70 W RED OAK LANE WHITE PLAINS	TENNIS TOURNA	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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13 controlled entity?
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

44740U 702V V 20-7.6F PAGE 49

Schedule R (Form 990) 2020 Page 3

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

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?			
	Descript of (i) interest (ii) approxition (iii) varieties or (iv) vent from a controlled entity	1a		X
	Gift, grant, or capital contribution to related organization(s)	1b	Х	
С		1c		X
	Loans or loan guarantees to or for related organization(s)	1d	Х	
е		1e		Х
f	Dividends from related organization(s)	1f		Х
a	Sale of assets to related organization(s)	1g		Х
		1h		Х
	Exchange of assets with related organization(s).	1i		Х
	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
J	Lease of facilities, equipment, of other assets to related organization(s),			
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	х	
	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
		1n		
		10		
U	Sharing of paid employees with related organization(s)			
_	Beimburgement paid to related argenization(s) for expanses	1р		Х
	Reimbursement paid to related organization(s) for expenses	1q	х	
q	Reimbursement paid by related organization(s) for expenses	14		
		1r		x
r		1s		X
<u>ຮ</u>	Other transfer of cash or property from related organization(s).			

Name of related organization Transaction type (a-s) Name of related organization Method of amount NCINNATI TENNIS LLC D 3,784,481. COST TA NATIONAL TENNIS CENTER INC K 1,833,148. CASH TA FOUNDATION INCORPORATED N 279,281. FMV TA FOUNDATION INCORPORATED O 2,427,693. FMV						
	Transaction		(d) Method of determining amount involved			
(1) CINCINNATI TENNIS LLC	D	3,784,481.	COST			
(2) USTA NATIONAL TENNIS CENTER INC	K	1,833,148.	CASH			
(3) USTA FOUNDATION INCORPORATED	N	279,281.	FMV			
(4) USTA FOUNDATION INCORPORATED	0	2,427,693.	FMV			
(5) USTA FOUNDATION INCORPORATED	Q	514,647.	CASH			
(6) USTA PLAYER DEVELOPMENT INC.	D	13,720,405.	CASH			

Schedule R (Form 990) 2020

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44740U 702V

V 20-7.6F

PAGE 50

Page 3 Schedule R (Form 990) 2020

Par	Transactions with Related Organizations. Complete if the organization answered Te	is on Form 990, Pai	11 IV, line 34, 35b, 01 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 r	elated 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	
	Gift, grant, or capital contribution from related organization(s)				1c	
	Loans or loan guarantees to or for related organization(s)				1d	
	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)				1k	
ı	Performance of services or membership or fundraising solicitations for related organization(s)				11	
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	
0	Sharing of paid employees with related organization(s)				10	
	Reimbursement paid to related organization(s) for expenses				1p	
q	Reimbursement paid by related organization(s) for expenses				1q	
r	Other transfer of cash or property to related organization(s)				1r	
S	Other transfer of cash or property from related organization(s).			<u> </u>	1s	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete the			action thres		
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	Method o	(d) of deterr nt involv	
(1)	USTA PLAYER DEVELOPMENT INC.	N	802,897.	COST		
(2)	NAT'AL TENNIS CENTER, INC SEE PART VII	N/O				
(3)	USTA PLAYER DEVELOPMENT INC SEE PART VII	0				
(4)						
(5)						

Schedule R (Form 990) 2020

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PAGE 51

13-5459420

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

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	(b) Primary activity	(b) (c) Primary activity Legal domicile (state or foreign country) un	(d) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	Are all sec 501 organiz	partners etion (c)(3) eations?	ners Share of total income assets (f) (g) Share of end-of-year assets		Dispro	(h) Disproportionate allocations? October V - UBI amount in box 20 of Schedule K-1 (Form 1065)		(j) General or managing partner?		(i) (j) General managii hedule K-1 partnei		(k) Percentage ownership
			sections 512 - 514)	Yes	No			Yes	No	(FOIII 1003)	Yes	No	1		
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
(7)															
(8)															
(9)															
(10)															
(11)															
(12)															
(13)															
(14)	_														
(15)															
(16)															

Schedule R (Form 990) 2020

Schedule R (Form 990) 2020

44740U 702V V 20-7.6F PAGE 52

Page 4

Schedule R (Form 990) 2020 Page **5**

Part VII 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.