

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

- ▶ Do not enter Social Security numbers on this form as it may be made public.
- ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

A For the **2016** calendar year, or tax year beginning , **2016**, and ending , **20**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization UNITED STATES TENNIS ASSOCIATION INCORPORATED			D Employer identification number 13-5459420		
	Doing Business As			E Telephone number (914) 696-7000		
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 70 WEST RED OAK LANE					
	City or town, state or province, country, and ZIP or foreign postal code WHITE PLAINS, NY 10604			G Gross receipts \$ 271,005,325.		
F Name and address of principal officer: KATRINA ADAMS 70 W. RED OAK LANE WHITE PLAINS, NY 10604			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
			H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No			
			If "No," attach a list. (see instructions)			
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c)(6) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			J Website: ▶ WWW.USTA.COM			H(c) Group exemption number ▶
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1973			M State of legal domicile: NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROMOTE & DEVELOP THE GROWTH OF TENNIS		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	14.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	14.
	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	779.
	6 Total number of volunteers (estimate if necessary)	6	50.
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	222,943.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	16,947,522.	18,277,530.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	237,109,265.	235,525,821.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,259,788.	4,262,236.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,887,559.	1,646,074.
		265,204,134.	259,711,661.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	70,486,345.	72,843,928.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	43,664,913.	47,092,132.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶	0.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	116,861,586.	132,925,365.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	231,012,844.	252,861,425.	
19 Revenue less expenses. Subtract line 18 from line 12	34,191,290.	6,850,236.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	337,498,808.	370,133,774.
	22 Net assets or fund balances. Subtract line 21 from line 20	64,250,667.	82,414,829.
	273,248,141.	287,718,945.	

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Part II Signature Block

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

Sign Here	Signature of officer			11/14/2017	
	GORDON SMITH			Date	
Paid Preparer Use Only	Type or print name and title			EXEC. DIR. & COO	
	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			Phone no.
Firm's address ▶					

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2016)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

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? Yes No

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

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

If "Yes," describe these changes on Schedule O.

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

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

US OPEN - SEE SCHEDULE O

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

COMMUNITY TENNIS DIVISION - SEE SCHEDULE O

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

PROFESSIONAL TENNIS DIVISION - SEE SCHEDULE O

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

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses ▶

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>		X
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		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? <i>If "Yes," complete Schedule C, Part II.</i>		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>	X	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i>		X
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>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>		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? <i>If "Yes," complete Schedule D, Part IV.</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>		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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	X	
b Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>	X	
c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV.</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>		X
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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions).		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	X	
24a 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a 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? <i>If "Yes," complete Schedule L, Part I.</i>		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		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 A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		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)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
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>		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
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.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for line numbers (1a-14b), descriptions, and Yes/No checkboxes. Includes entries for Form 1096, Form W-2G, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 4966, Form 501(c)(7), Form 501(c)(12), Form 990, Form 720, and Form 702.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (14), 1b (14), 2, 3, 4, 5, 6, 7a, 7b, 8, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records:

USTA ACCOUNTING DEPT 70 WEST RED OAK LANE WHITE PLAINS, NY 10604

914 696-7000

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KATRINA ADAMS DIRECTOR, PRESIDENT, CEO	19.00 4.00	X		X			38,522.	0.	0.	
(2) ALEXANDER ANDREWS, IV DIRECTOR, 1ST VP	5.00 3.00	X		X			25,000.	0.	0.	
(3) THOMAS HO DIRECTOR, VP	7.00 4.00	X		X			20,000.	0.	0.	
(4) DONALD TISDEL DIRECTOR, VP	7.00 4.00	X		X			20,000.	0.	0.	
(5) PATRICK GALBRAITH DIRECTOR, SEC/TREAS	7.00 4.00	X		X			20,000.	0.	0.	
(6) FABRIZIO ALCOBE-FIERRO DIRECTOR	5.00 3.00	X					10,000.	0.	0.	
(7) JOAN BAKER DIRECTOR	5.00 3.00	X					10,000.	0.	0.	
(8) LAUREN BARNIKOW DIRECTOR	5.00 3.00	X					10,000.	0.	0.	
(9) MARK EIN DIRECTOR	5.00 3.00	X					10,000.	0.	0.	
(10) MICHAEL J. MCNULTY III DIRECTOR	5.00 3.00	X					10,000.	0.	0.	
(11) TODD MARTIN DIRECTOR	5.00 3.00	X					14,000.	0.	0.	
(12) CHANDA RUBIN-HOLLIER DIRECTOR	5.00 3.00	X					17,900.	0.	0.	
(13) ANDREW VALDEZ DIRECTOR	5.00 3.00	X					10,000.	0.	0.	
(14) KATHLEEN WU DIRECTOR	5.00 3.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) GORDON SMITH EXECUTIVE DIRECTOR, COO	35.00 20.00			X				1,168,889.	0.	140,124.
(16) ANDREA HIRSCH CHIEF ADMINISTRATIVE OFFICER	40.00 0.			X				810,822.	0.	29,874.
(17) ED NEPLL CHIEF FINANCIAL OFFICER	40.00 0.			X				621,409.	0.	41,848.
(18) LEW SHERR CHIEF REVENUE OFFICER	40.00 0.				X			980,894.	0.	46,930.
(19) KURT KAMPERMAN CEO, COMMUNITY TENNIS	40.00 0.				X			796,085.	0.	46,930.
(20) DAVID BREWER CHIEF PROF. TENNIS OFFICER	40.00 0.				X			518,805.	0.	46,930.
(21) STACEY MILKOVICH CHIEF EXECUTIVE, PRO TENNIS	40.00 0.				X			397,441.	0.	26,310.
(22) DEANNE POWNALL MANAGING DR.PARTNERSHIP MRKTG	40.00 0.					X		374,333.	0.	46,293.
(23) LAWRENCE BONFANTE CHIEF INFORMATION OFFICER	40.00 0.					X		379,197.	0.	44,225.
(24) CHRISTIAN WIDMAIER MANAGING DIR. CORP. COMMUNICAT	40.00 0.					X		383,037.	0.	45,811.
(25) STACIELLEN MISCHER ASSOCIATE GENERAL COUNSEL	40.00 0.					X		350,966.	0.	42,882.
1b Sub-total								215,422.	0.	0.
c Total from continuation sheets to Part VII, Section A								7,600,489.	0.	609,474.
d Total (add lines 1b and 1c)								7,815,911.	0.	609,474.

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

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

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 **▶ 106**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) DANIEL MALASKY ----- GENERAL COUNSEL	40.00 0.					X		372,671.	0.	45,356.
(27) MARY S. HUNT ----- CHIEF MARKETING OFFICER	40.00 0.						X	445,940.	0.	5,961.

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

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

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

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

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 **▶**

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b	18,174,530.				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions) . .	1e					
	f All other contributions, gifts, grants, and similar amounts not included above .	1f	103,000.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f ▶			18,277,530.			
Program Service Revenue	2a <u>TOURNAMENT RELATED</u>			Business Code			
					234,263,019.	234,263,019.	
	b <u>TENNIS PROGRAM FEES</u>				1,247,942.	1,247,942.	
	c <u>BALL TEST FEES</u>				14,860.	14,860.	
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f ▶				235,525,821.		
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts). <u>ATTACHMENT 3</u> ▶				1,506,481.	1,506,481.	
	4 Income from investment of tax-exempt bond proceeds . ▶				0.		
	5 Royalties ▶				1,646,074.		
				(i) Real	(ii) Personal		
	6a Gross rents						
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss) ▶				0.		
	7a Gross amount from sales of assets other than inventory			(i) Securities	(ii) Other		
				9,426,804.	4,622,615.		
	b Less: cost or other basis and sales expenses			7,922,109.	3,371,555.		
	c Gain or (loss)			1,504,695.	1,251,060.		
	d Net gain or (loss) ▶				2,755,755.		
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 a				0.		
	b Less: direct expenses b				0.		
c Net income or (loss) from fundraising events. ▶				0.			
9a Gross income from gaming activities. See Part IV, line 19 a				0.			
b Less: direct expenses b				0.			
c Net income or (loss) from gaming activities. ▶				0.			
10a Gross sales of inventory, less returns and allowances a				0.			
b Less: cost of goods sold b				0.			
c Net income or (loss) from sales of inventory. ▶				0.			
Miscellaneous Revenue			Business Code				
11a <u>ADVERTISING</u>			541800				
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d ▶				0.			
12 Total revenue. See instructions. ▶				259,711,661.	237,032,302.		

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	72,237,635.			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	606,293.			
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.			
5 Compensation of current officers, directors, trustees, and key employees	5,673,291.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	34,310,640.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,271,785.			
9 Other employee benefits	3,489,697.			
10 Payroll taxes	2,346,719.			
11 Fees for services (non-employees):				
a Management	0.			
b Legal	1,973,466.			
c Accounting	245,000.			
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17.	0.			
f Investment management fees	0.			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	13,802,192.			
12 Advertising and promotion	2,849,568.			
13 Office expenses	2,204,426.			
14 Information technology	1,721,069.			
15 Royalties	0.			
16 Occupancy	4,015,337.			
17 Travel	14,184,576.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	456,989.			
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	4,481,820.			
23 Insurance	4,109,019.			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>EVENT PRIZE MONEY/OTHER</u>	46,722,272.			
b <u>PRINTING & PUBLICATIONS</u>	3,895,547.			
c <u>TENNIS EVENT PRODUCTIONS</u>	11,678,107.			
d <u>MEMBERSHIP OUTSOURCED SERVIC</u>	3,309,568.			
e All other expenses _____	17,276,409.			
25 Total functional expenses. Add lines 1 through 24e	252,861,425.			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0.			

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	294,031.	1	475,902.
	2 Savings and temporary cash investments	120,173,586.	2	88,119,334.
	3 Pledges and grants receivable, net	0.	3	0.
	4 Accounts receivable, net	15,193,419.	4	10,837,087.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.	5	0.
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0.	6	0.
	7 Notes and loans receivable, net	7,286,649.	7	6,677,046.
	8 Inventories for sale or use	408,618.	8	281,195.
	9 Prepaid expenses and deferred charges	6,054,070.	9	6,761,436.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 109,480,767.		
	b Less: accumulated depreciation	10b 27,813,470.	23,636,908.	10c 81,667,297.
	11 Investments - publicly traded securities	ATCH 4 48,600,416.	11	52,791,984.
	12 Investments - other securities. See Part IV, line 11	99,053,278.	12	102,169,476.
	13 Investments - program-related. See Part IV, line 11	13,635,996.	13	16,179,145.
	14 Intangible assets	0.	14	0.
	15 Other assets. See Part IV, line 11	3,161,837.	15	4,173,872.
16 Total assets. Add lines 1 through 15 (must equal line 34)	337,498,808.	16	370,133,774.	
Liabilities	17 Accounts payable and accrued expenses	33,327,999.	17	35,736,271.
	18 Grants payable	0.	18	0.
	19 Deferred revenue	29,667,025.	19	45,429,415.
	20 Tax-exempt bond liabilities	0.	20	0.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	1,255,643.	25	1,249,143.
	26 Total liabilities. Add lines 17 through 25	64,250,667.	26	82,414,829.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	273,248,141.	27	287,718,945.
	28 Temporarily restricted net assets	0.	28	0.
	29 Permanently restricted net assets	0.	29	0.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	273,248,141.	33	287,718,945.
34 Total liabilities and net assets/fund balances	337,498,808.	34	370,133,774.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	259,711,661.
2	Total expenses (must equal Part IX, column (A), line 25)	2	252,861,425.
3	Revenue less expenses. Subtract line 2 from line 1	3	6,850,236.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	273,248,141.
5	Net unrealized gains (losses) on investments	5	7,620,568.
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 in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	287,718,945.

Part XII Financial Statements and Reporting

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

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

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

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2016

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

Name of the organization

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(6) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization UNITED STATES TENNIS ASSOCIATION INCORPORATED	Employer identification number 13-5459420
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Part I **Contributors** (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	_____	\$ 103,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number
13-5459420

Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____	_____ _____	_____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____	_____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____	_____ _____	_____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____	_____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____	_____ _____	_____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____	_____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____	_____ _____	_____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____	_____ _____

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2016

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization UNITED STATES TENNIS ASSOCIATION INCORPORATED	Employer identification number 13-5459420
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

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

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

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

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

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

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 70%; text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

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

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

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

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

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

Part IV Supplemental Information

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

Part IV Supplemental Information *(continued)*

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

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.

2016

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Open to Public Inspection

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number

UNITED STATES TENNIS ASSOCIATION INCORPORATED

13-5459420

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. (a) Total number of conservation easements, (b) Total acreage restricted by conservation easements, (c) Number of conservation easements on a certified historic structure included in (a), (d) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included in Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2016

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange programs
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements.

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Table with columns: Amount, 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
a Board designated or quasi-endowment %
b Permanent endowment %
c Temporarily restricted endowment %
The percentages on lines 2a, 2b, and 2c should equal 100%.

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
(i) unrelated organizations
(ii) related organizations
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) COMMON TRUST & PVT MUTUAL FUND	45,222,888.	FMV
(B) ALTERNATIVE INVESTMENTS	56,946,588.	FMV
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	102,169,476.	

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) POST RETIREMENT BENEFITS	1,131,143.	
(3) LONG TERM SCHOLARSHIPS PAYABLE	118,000.	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	1,249,143.	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

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

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

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

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information.

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

FIN 48 DISCLOSURE

THE ORGANIZATION HAS NOT TAKEN AN UNSUBSTANTIATED TAX POSITION THAT WOULD REQUIRE PROVISION OF A LIABILITY UNDER ASC 740, "INCOME TAXES." THE ORGANIZATION BELIEVES IT IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR THE YEARS PRIOR TO 2013.

Part XIII Supplemental Information *(continued)*

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2016

**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.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

Part I General Information on Grants and Assistance

- 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? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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) LA JOLLA BEACH & TENNIS CLUB 2000 SPINDRIFT DR. LA JOLLA, CA 92037	33-0265921	501C3	7,800.				ADULT SENIOR CHAMPIONSHIP GRANT
(2) LONGWOOD CRICKET CLUB 564 HAMMOND ST. CHESTNUT HILL, MA 02167	04-1554270	501C7	7,000.				ADULT SENIOR CHAMPIONSHIP GRANT
(3) GERMANTOWN CRICKET CLUB 411 W.MAINHEIM ST. PHILADELPHIA, PA 19144	23-0620930	501C7	6,200.				ADULT SENIOR CHAMPIONSHIP GRANT
(4) UNITED STATES PROFESSIONAL TENNIS ASSOCIATION 3535 BRIARPARK DR. HOUSTON, TX 77042	74-1818176	501C6	56,250.				ALLIED PARTNER GRANT
(5) PROFESSIONAL TENNIS REGISTRY (PTR) PO BOX 4739 HILTON HEAD, SC 29938	57-0795565	501C6	28,125.				ALLIED PARTNER GRANT
(6) PHIT AMERICA 8505 FENTON ST. SILVER SPRING, MD 20910	46-1432776	501C4	12,500.				ALLIED PARTNER GRANT
(7) THE VANDERBILT UNIVERSITY 2301 VANDERBILT PL. NASHVILLE, TN 37240	62-0476822	501C3	24,000.				COLLEGE COMPETITION GRANT
(8) PAC-12 CONFERENCE 360 THIRD ST. SAN FRANCISCO, CA 94107	94-1459048	501C3	6,000.				COLLEGE COMPETITION GRANT
(9) UNIVERSITY OF ILLINOIS 506 S. WRIGHT ST. URBANA, IL 61801	37-6000511	501C3	7,500.				COMMUNITY INVOLVEMENT GRANT
(10) MIAMI TOWNSHIP, HAMILTON CO. 3780 SHADY LA. NORTH BEND, OH 45052	31-6000589	GOVERNMENT	15,000.				COURT LINE GRANT YOUTH
(11) TENNESSEE TENNIS ASSOCIATION 1029 17TH AVE. S. NASHVILLE, TN 37212	62-0992696	501C4	10,000.				COURT LINE GRANT YOUTH
(12) QUINCY UNIVERSITY 1800 COLLEGE AVE QUINCY, IL 62301	37-0661231	501C3	7,000.				COURT LINE GRANT YOUTH

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

3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2016)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2016

**Open to Public
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Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

Part I General Information on Grants and Assistance

- 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? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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) YORK ADAMS COMMUNITY TENNIS ASSOCIATION PO BOX 1551 HANOVER, PA 17331	20-2952274	501C3	6,500.				COURT LINE GRANT YOUTH
(2) KENTUCKY TENNIS ASSOCIATION, INC. 8900 GREENWAY CMN PL. LOUISVILLE, KY 40220	61-0916485	501C4	5,375.				COURT LINE GRANT YOUTH
(3) NATIONAL PUBLIC PARKS TENNIS ASSOC. 8500 WINDFIELD AVE. KANSAS CITY, MO 64153	84-6000580	GOVERNMENT	6,000.				EVENTS GRANT
(4) FLATHEAD VALLEY COMMUNITY COLLEGE 777 GRANDVIEW DR. KALISPELL, MT 59901	81-0299199	501C6	28,000.				FACILITY ASSISTANCE PROGRAM GRANT
(5) MACH ACADEMY, INC. 4360 QUAIL CREEK RD. MARTINEZ, GA 30907	58-2013645	501C3	22,500.				FACILITY ASSISTANCE PROGRAM GRANT
(6) VAN DER MEER TENNIS UNIVERSITY PO BOX 5902 HILTON HEAD ISLAND, SC 29938	94-2290118		22,500.				FACILITY ASSISTANCE PROGRAM GRANT
(7) CITY OF GRAND ISLAND PO BOX 1968 GRAND ISLAND, NE 68802	47-6006205	MUNICIPALITY	20,000.				FACILITY ASSISTANCE PROGRAM GRANT
(8) CITY OF JACKSONVILLE 117 W DUVAL ST. JACKSONVILLE, FL 32202	59-6000344	MUNICIPALITY	20,000.				FACILITY ASSISTANCE PROGRAM GRANT
(9) FIRST SERVE OKC FOUNDATION 7301 BROADWAY EXT OKLAHOMA CITY, OK 73116	46-3499004	501C3	20,000.				FACILITY ASSISTANCE PROGRAM GRANT
(10) KALAMAZOO COLLEGE 1200 ACADEMY ST. KALAMAZOO, MI 49006	38-1358014	501C3	20,000.				FACILITY ASSISTANCE PROGRAM GRANT
(11) SHAKER HEIGHTS CITY SCHOOL DISTRICT 15600 PARKLAND DR. SHAKER HEIGHTS, OH 44120	34-1083568	GOVERNMENT	20,000.				FACILITY ASSISTANCE PROGRAM GRANT
(12) KOKOSING VALLEY COMMUNITY TENNIS ASSOCIATIO 111 NORTH CONCORD ST MOUNT VERNON, OH 43050	26-4838508		18,000.				FACILITY ASSISTANCE PROGRAM GRANT

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

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Schedule I (Form 990) (2016)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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OMB No. 1545-0047

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

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

Part I General Information on Grants and Assistance

- 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? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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) WEST HOLMES LOCAL SCHOOL DISTRICT 28 WEST JACKSON ST. MILLERSBURG, OH 44654	34-6005088	SCHOOL DISTRICT	18,000.				FACILITY ASSISTANCE PROGRAM GRANT
(2) TOWN OF HOLLY SPRINGS PO BOX 8 HOLLY SPRINGS, NC 27540	56-1143973	GOVERNMENT	17,000.				FACILITY ASSISTANCE PROGRAM GRANT
(3) INDEPENDENT SCHOOL DISTRICT 877 214 FIRST AVE. N.E BUFFALO, MN 55313	41-6004776	SCHOOL DISTRICT	15,000.				FACILITY ASSISTANCE PROGRAM GRANT
(4) TOWN OF APEX PO BOX 250 APEX, NC 27502	56-6001166	501C3	15,000.				FACILITY ASSISTANCE PROGRAM GRANT
(5) PENN-HARRIS-MADISON EDUCATION FOUNDATION 55900 BITTERSWEET RD. MISHAWAKA, IN 46545	35-1996785	501C3	13,000.				FACILITY ASSISTANCE PROGRAM GRANT
(6) TOWN OF THOMASTON 158 MAIN ST. THOMASTON, CT 06787	06-6002105	GOVERNMENT	13,000.				FACILITY ASSISTANCE PROGRAM GRANT
(7) ELLSWORTH COMMUNITY SCHOOL DISTRICT 300 HILLCREST ST ELLSWORTH, WI 54011	39-6001902	SCHOOL DISTRICT	12,000.				FACILITY ASSISTANCE PROGRAM GRANT
(8) BOT OF THE LELAND STANFORD JUNIOR UNIV 3145 PORTER DR. PALO ALTO, CA 94304	94-1156365	501C3	10,000.				FACILITY ASSISTANCE PROGRAM GRANT
(9) MURRAYWOOD SWIM & RACQUET CLUB PO BOX 336 IRMO, SC 29063	57-0618538		10,000.				FACILITY ASSISTANCE PROGRAM GRANT
(10) RARITAN VALLEY YMCA 144 TICES LA. EAST BRUNSWICK, NJ 08816	22-1494457	501C3	10,000.				FACILITY ASSISTANCE PROGRAM GRANT
(11) ROCKINGHAM COMMUNITY COLLEGE PO BOX 38 WENTWORTH, NC 27375	56-0812577	EDUCATIONAL INS	10,000.				FACILITY ASSISTANCE PROGRAM GRANT
(12) SAN ANTONIO TENNIS ASSOCIATION 1503 SAN PEDRO AVE SAN ANTONIO, TX 78212	38-4014370	501C3	10,000.				FACILITY ASSISTANCE PROGRAM GRANT

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

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Schedule I (Form 990) (2016)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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Name of the organization

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

Part I General Information on Grants and Assistance

- 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? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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) SPEARFISH SCHOOL DISTRICT 40-2 525 E. ILLINOIS SPEARFISH, SD 57783	46-0278406	SCHOOL DISTRICT	10,000.				FACILITY ASSISTANCE PROGRAM GRANT
(2) UNITED WAY OF LONG ISLAND 819 GRAND BLVD DEER PARK, NY 11729	11-6042392	501C3	10,000.				FACILITY ASSISTANCE PROGRAM GRANT
(3) VIRGINIA COMMONWEALTH UNIVERSITY PO BOX 843035 RICHMOND, VA 23284	54-6001758	EDUCATIONAL INS	10,000.				FACILITY ASSISTANCE PROGRAM GRANT
(4) YMCA OF CENTRAL FLORIDA 433 NORTH MILLS AVE ORLANDO, FL 32803	59-0624430	501C3	10,000.				FACILITY ASSISTANCE PROGRAM GRANT
(5) HARRISBURG SCHOOL DISTRICT 200 WILLOW ST. HARRISBURG, SD 57032	46-6002218	SCHOOL DISTRICT	9,000.				FACILITY ASSISTANCE PROGRAM GRANT
(6) VILLAGE OF LITTLE CHUTE 108 W MAIN ST. LITTLE CHUTE, WI 54140	39-6006304	GOVERNMENT	8,500.				FACILITY ASSISTANCE PROGRAM GRANT
(7) CITY OF CEDAR RAPIDS PO BOX 2148 CEDAR RAPIDS, IA 52406	42-6004336	MUNICIPALITY	8,000.				FACILITY ASSISTANCE PROGRAM GRANT
(8) CITY OF FORT SMITH PO BOX 1908 FORT SMITH, AR 72902	71-6003637		8,000.				FACILITY ASSISTANCE PROGRAM GRANT
(9) SCHOOLCRAFT COLLEGE 18600 HAGGERTY RD. LIVONIA, MI 48152	38-1685740	EDUCATIONAL INS	8,000.				FACILITY ASSISTANCE PROGRAM GRANT
(10) TOWN OF CORNELIUS PO BOX 399 CORNELIUS, NC 28031	56-6001209	MUNICIPALITY	8,000.				FACILITY ASSISTANCE PROGRAM GRANT
(11) TOWN OF SALEM 33 GEREMONTY DR. SALEM, NH 03079	02-6000817	MUNICIPALITY	8,000.				FACILITY ASSISTANCE PROGRAM GRANT
(12) CITY OF LA CRESCENT 315 MAIN ST. LA CRESCENT, MN 55947	41-6005291	GOVERNMENT	7,500.				FACILITY ASSISTANCE PROGRAM GRANT

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

3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2016)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2016

**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.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

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

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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) TOPEKA TENNIS ASSOCIATION 1974 E 300 RD. LECOMPTON, KS 66050	48-0938061	501C3	7,500.				FACILITY ASSISTANCE PROGRAM GRANT
(2) COOK COUNTY TENNIS ASSOCIATION PO BOX 34 GRAND MARAIS, MN 55604	41-1735196	501C3	7,000.				FACILITY ASSISTANCE PROGRAM GRANT
(3) MONTGOMERY COUNTY FAMILY YMCA 101 E. CHERRY ST. RED OAK, IA 51566	42-1433436	501C3	7,000.				FACILITY ASSISTANCE PROGRAM GRANT
(4) WORCESTER TOWNSHIP PO BOX 767 WORCESTER, PA 19490	23-6000610	GOVERNMENT	7,000.				FACILITY ASSISTANCE PROGRAM GRANT
(5) JACKSON WEST-TN TENNIS ASSOCIATION PO BOX 10601 JACKSON, TN 38308	46-1755820		6,250.				FACILITY ASSISTANCE PROGRAM GRANT
(6) BOONE COUNTY TENNIS CENTER INC. 2691 DEER RUN ZIONSVILLE, IN 46077	45-5321042	501C7	6,000.				FACILITY ASSISTANCE PROGRAM GRANT
(7) CITY OF WATERTOWN 309 LEWIS AVE S WATERTOWN, MN 55388	41-6005622	GOVERNMENT	6,000.				FACILITY ASSISTANCE PROGRAM GRANT
(8) FAIRFIELD BAY COMMUNITY CLUB PO BOX 1370 FAIRFIELD BAY, AR 72031	71-0410502		6,000.				FACILITY ASSISTANCE PROGRAM GRANT
(9) WILMINGTON CITY SCHOOLS 341 SOUTH NELSON AVE. WILMINGTON, OH 45177	31-6001014	SCHOOL DISTRICT	6,000.				FACILITY ASSISTANCE PROGRAM GRANT
(10) USTA FOUNDATION INC. 70 WEST RED OAK LA. WHITE PLAINS, NY 10604	13-3782331	501C3	510,443.				GRANT TO SERVES
(11) INTERNATIONAL TENNIS HALL OF FAME 194 BELLEVUE AVE. NEWPORT, RI 02840	13-6144356	501C3	40,000.				HALL OF FAME GRANT
(12) JUNIOR TENNIS CHAMPIONS CENTER 5200 PAINT BRANCH PKY	52-2114223	501C3	25,000.				JUNIOR ITF EVENT GRANT

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

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

Schedule I (Form 990) (2016)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2016

**Open to Public
Inspection**

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

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

Part I General Information on Grants and Assistance

- 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? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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) CITY OF SURPRISE (SURPRISE TENNIS&RACQUET) 14469 W. PARADISE LA. SURPRISE, AZ 85374	86-6007796	GOVERNMENT	6,796.				LEAGUES GRANT
(2) USTA FOUNDATION INC. 70 WEST RED OAK LA. WHITE PLAINS, NY 10604	13-3782331	501C3	25,000.				MULTICULTURAL GRANT
(3) DALLAS TENNIS ASSOCIATION 14679 MIDWAY RD. ADDISON, TX 75001	75-6020581	501C3	10,000.				MULTICULTURAL GRANT
(4) LEGACY YOUTH TENNIS AND EDUCATION 4842 RIDGE AVE. PHILAPELPHIA, PA 19129	23-1747032	501C3	10,000.				MULTICULTURAL GRANT
(5) SPORTSMEN'S TENNIS CLUB & ENRICHMENT CENTER 950 BLUE HILL AVE. DORCHESTER, MA 02124	23-7037183	501C3	10,000.				MULTICULTURAL GRANT
(6) USTA SOUTH CAROLINA 18 WOODCROSS DR. COLUMBIA, SC 29212	57-0665261	501C4	10,000.				MULTICULTURAL GRANT
(7) GREENSBORO TENNIS FOUNDATION 3802 JAYCEE PARK DR. GREENSBORO, NC 27455	56-2040723	501C3	8,000.				MULTICULTURAL GRANT
(8) MACH ACADEMY, INC. 4360 QUAIL CREEK RD. MARTINEZ, GA 30907	58-2013645	501C3	8,000.				MULTICULTURAL GRANT
(9) MOUNTAIN VIEW SPORTS/RACQUET CLUB PO BOX 152738 SAN DIEGO, CA 92110	75-2971369	501C3	8,000.				MULTICULTURAL GRANT
(10) RBR SPORTS MANAGEMENT LLC 18400 S. AVALON BLVD CARSON, CA 90746	46-1850378		8,000.				MULTICULTURAL GRANT
(11) UNITED STATES PROFESSIONAL TENNIS ASSOC. IN 3535 BRIARPARK DR. HOUSTON, TX 77042	74-1818176	501C6	7,750.				MULTICULTURAL GRANT
(12) SOUTH ATLANTA CTA 2881 WRIGHT DR. ATLANTA, GA 30311	58-1885686	501C3	6,000.				MULTICULTURAL GRANT

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

3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2016)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2016

**Open to Public
Inspection**

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

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

Part I General Information on Grants and Assistance

- 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? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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 PEACHTREE CORN'S, GA 30092	58-1190935	501C4	10,774,243.				SECTION GRANT
(2) USTA/MIDWEST SECTION 1310 EAST 96TH ST. INDIANAPOLIS, IN 46240	23-7417933	501C4	5,228,543.				SECTION GRANT
(3) USTA/TEXAS TENNIS ASSOCIATION 8105 EXCHANGE DR. AUSTIN, TX 78754	74-2182392	501C4	3,387,339.				SECTION GRANT
(4) USTA/EASTERN SECTION 70 WEST RED OAK LA. WHITE PLAINS, NY 10604	13-5042070	501C4	3,289,345.				SECTION GRANT
(5) USTA/NORTHERN CALIFORNIA SECTION 1920 NORTH LOOP RD.. ALAMEDA, CA 94502	94-1057590	501C3	3,102,418.				SECTION GRANT
(6) USTA/FLORIDA SECTION 1 DEUCE CT. DAYTONA BEACH, FL 32124	23-7161642	501C4	2,992,164.				SECTION GRANT
(7) USTA/SOUTHERN CALIFORNIA SECTION PO BOX 240015 LOS ANGELES, CA 90024	95-1243600	501C4	2,897,340.				SECTION GRANT
(8) USTA/INTERMOUNTAIN TENNIS SECTION 9145 E. KENYON AVE. DENVER, CO 80237	84-0726651	501C4	2,702,364.				SECTION GRANT
(9) USTA/MID-ATLANTIC SECTION 11410 ISAAC NEWTON SQ N. RESTON, VA 20190	54-1472806	501C3	2,488,331.				SECTION GRANT
(10) USTA/MIDDLE STATES SECTION PO BOX 987 VALLEY FORGE, PA 19482	23-1688212	501C4	2,239,685.				SECTION GRANT
(11) USTA/TENNIS NEW ENGLAND 110 TURNPIKE RD. WESTBOROUGH, MA 01581	04-6006570	501C4	2,165,038.				SECTION GRANT
(12) USTA/MISSOURI VALLEY SECTION 6400 W. 95TH ST. OVERLAND PARK, KS 66212	23-7416298	501C4	1,915,458.				SECTION GRANT

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

3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2016)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2016

**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.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

Part I General Information on Grants and Assistance

- 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? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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 SECTION 4840 SW WESTERN AVE. BEAVERTON, OR 97005	93-0853818	501C3	1,804,138.				SECTION GRANT
(2) USTA/NORTHERN SECTION 1001 W. 98TH ST. BLOOMINGTON, MN 55431	41-1675510	501C3	1,259,269.				SECTION GRANT
(3) USTA/SOUTHWEST SECTION 7010 E. ACOMA DR. SCOTTSDALE, AZ 85254	85-0254477	501C4	1,169,080.				SECTION GRANT
(4) USTA/HAWAII PACIFIC SECTION 1888 KALAKAUA AVE. HONOLULU, HI 96815	23-7297012	501C4	827,700.				SECTION GRANT
(5) USTA/CARIBBEAN SECTION PO BOX 40439 SAN JUAN, PR 00940	66-0413224		688,926.				SECTION GRANT
(6) TENNIS INDUSTRY ASSOCIATION 117 EXECUTIVE CTR HILTON HEAD IS, SC 29928	54-0162283	501C6	400,000.				TENNIS ON CAMPUS
(7) NIRSA SERVICES CORPORATION 4185 SW RESEARCH WAY CORVALLIS, OR 97333	93-1090612	501C3	85,660.				TENNIS ON CAMPUS GRANT
(8) PROFESSIONAL TENNIS REGISTRY (PTR) PO BOX 4739 HILTON HEAD, SC 29938	57-0795565	501C6	28,125.				TENNIS ON CAMPUS GRANT
(9) GATEWAY CONFLUENCE WHEELCHAIR SPORTS FDN 1806 EAST D ST. BELLEVILLE, IL 62221	37-1380800	501C3	42,000.				WHEELCHAIR GRANT
(10) CITY OF MISSION VIEJO 200 CIVIC CENTER MISSION VIEJO, CA 92691	33-0283448	501C3	22,500.				WHEELCHAIR GRANT
(11) TENNIS 4 EVERYONE, INC. 3710 MENDENDEZ DR. PENSACOLA, FL 32503	59-3697411	501C3	22,500.				WHEELCHAIR GRANT
(12) WEST COAST WHEELCHAIR TENNIS ASSOCIATION 7825 ETHEL AVE. NORTH HOLLYWOOD, CA 91605	27-1100973	501C3	22,500.				WHEELCHAIR GRANT

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

3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) (2016)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2016

**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.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

Part I General Information on Grants and Assistance

- 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? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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) BATON ROUGE WHEELCHAIR TENNIS ASSOC. 19037 EPERNAY CT. BATON ROUGE, LA 70817	58-1934935	501C3	15,225.				WHEELCHAIR GRANT
(2) BASELINE WHEELCHAIR TENNIS FOUNDATION 7290 MILLBROOK OAKS DR. LAKELAND, FL 33813	03-0578203	501C3	10,000.				WHEELCHAIR GRANT
(3) GUAM NATIONAL TENNIS FEDERATION PO BOX 2312 HAGATNA, GU 96932	66-0514446		10,000.				WHEELCHAIR GRANT
(4) PROFESSIONAL TENNIS REGISTRY (PTR) PO BOX 4739 HILTON HEAD, SC 29938	57-0795565	501C6	10,000.				WHEELCHAIR GRANT
(5) WHEELCHAIR TENNIS OF INDIANA 4717 BOULEVARD PL. INDIANAPOLIS, IN 46208	47-4187695	501C3	10,000.				WHEELCHAIR GRANT
(6) 2 BOUNCE TENNIS, INC. 36915 COOK ST. PALM DESERT, CA 92211	46-2662957	501C3	6,000.				WHEELCHAIR GRANT
(7) ADAPTIVE ATHLETICS UNIV OF ARIZONA CLUB SPO 1224 E. LOWELL ST. TUCSON, AZ 85721	32-0295267	EDUCATIONAL INS	6,000.				WHEELCHAIR GRANT
(8) MARY FREE BED HOSPITAL & REHAB CENTER 235 WEALTHY ST. SE GRAND RAPIDS, MI 49503	38-1359265	501C3	6,000.				WHEELCHAIR GRANT
(9) RECREATIONAL TEAM TENNIS 1776 BROADWAY SUITE 600 NEW YORK, NY 10019	36-3764354		305,000.				WORLD TEAM TENNIS
(10) MANHATTANVILLE COLLEGE CTR CAREER DEVELOPME 2900 PURCHASE ST. PURCHASE, NY 10577	13-1740469	501C3	17,000.				YOUTH TEAM TENNIS GRANT
(11) USTA PLAYER DEVELOPMENT INCORPORATED 70 WEST RED OAK LANE WHITE PLAINS, NY 10604	27-1368195	501C3	20,248,021.				OPERATING SUPPORT GRANT
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 61.

3 Enter total number of other organizations listed in the line 1 table ▶ 46.

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

Schedule I (Form 990) (2016)

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	6.	15,400.			
2 COURT LINE GRANT-YOUTH	2.	604.			
3 JUNIOR ITF EVENT GRANT	72.	40,187.			
4 MULTICULTURAL GRANT	148.	85,250.			
5 NJTL GRANT	3.	600.			
6 PARENT TRAINING GRANT	1.	250.			
7 PROGRAM EXCELLENCE GRANT	107.	57,250.			

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

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					
SENIOR INTERNATIONAL PLAY GRANT	79.	158,057.			
2					
WHEELCHAIR GRANT	14.	234,550.			
3					
YOUTH TEAM TENNIS GRANT	16.	10,145.			
4					
ZONAL COMPETITION GRANT	2.	4,000.			
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.

GRANT MONITORING PROCESS

THE ASSOCIATION MONITORS THE USE OF GRANT FUNDS PAID TO THE SECTIONS BY REQUIRING THE SECTIONS TO SUBMIT THEIR ANNUAL AUDITED FINANCIAL STATEMENTS AND FORM 990. THE SECTIONS ALSO MUST FILE A SECTION FUNDING ACCOUNTABILITY REPORT ANNUALLY. ORGANIZATIONS RECEIVING PUBLIC FACILITY FUNDING GRANTS MUST COMPLETE AN EXTENSIVE APPLICATION FOR FUNDING AND MUST RECEIVE PERMISSION IN WRITING TO DEVIATE FROM THE PROPOSED SPENDING PLAN. EACH ORGANIZATION IS ALSO REQUIRED TO SUBMIT A WRITTEN REPORT SEMI-ANNUALLY ON THEIR PROJECT AND RECEIVES A SITE VISIT BY AN ASSOCIATION REPRESENTATIVE TWICE PER YEAR. OTHER GRANTEEES ARE ALSO

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.

REQUIRED TO SUBMIT GRANT APPLICATIONS AND IF AWARDED, PRIOR TO RECEIVING THEIR FUNDS, A BUDGET AND DETAILED SPENDING PLAN. THEY ARE REQUIRED 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 J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

Part I Questions Regarding Compensation

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.

- | | |
|--|---|
| <input checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

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?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment?
 - b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
 - c** Participate in, or receive payment from, an equity-based compensation arrangement?
- 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:

- a** The organization?
 - b** Any related organization?
- 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:

- a** The organization?
 - b** Any related organization?
- 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.

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.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a	X	
2	X	
3		
4a	X	
4b		X
4c		X
5a		
5b		
6a		
6b		
7		
8		
9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation					
1	GORDON SMITH EXECUTIVE DIRECTOR, COO	(i)	791,378.	362,217.	15,294.	117,005.	23,119.	1,309,013.	103,561.
		(ii)	0.	0.	0.	0.	0.	0.	0.
2	ANDREA HIRSCH CHIEF ADMINISTRATIVE OFFICER	(i)	541,240.	258,412.	11,170.	18,503.	11,371.	840,696.	
		(ii)	0.	0.	0.				
3	ED NEPPL CHIEF FINANCIAL OFFICER	(i)	408,042.	213,056.	311.	18,503.	23,345.	663,257.	
		(ii)	0.	0.	0.				
4	LEW SHERR CHIEF REVENUE OFFICER	(i)	413,398.	555,625.	11,871.	18,503.	28,427.	1,027,824.	
		(ii)	0.	0.	0.				
5	KURT KAMPERMAN CEO, COMMUNITY TENNIS	(i)	561,079.	225,932.	9,074.	18,503.	28,427.	843,015.	
		(ii)	0.	0.	0.				
6	DAVID BREWER CHIEF PROF. TENNIS OFFICER	(i)	388,683.	128,751.	1,371.	18,503.	28,427.	565,735.	
		(ii)	0.	0.	0.				
7	MARY S. HUNT CHIEF MARKETING OFFICER	(i)	8,608.	120,000.	317,332.		5,961.	451,901.	
		(ii)	0.	0.	0.				
8	DEANNE POWNALL MANAGING DR.PARTNERSHIP MRKTG	(i)	245,342.	128,711.	280.	17,935.	28,358.	420,626.	
		(ii)	0.	0.	0.				
9	LAWRENCE BONFANTE CHIEF INFORMATION OFFICER	(i)	289,732.	88,661.	804.	18,503.	25,722.	423,422.	
		(ii)	0.	0.	0.				
10	CHRISTIAN WIDMAIER MANAGING DIR. CORP. COMMUNICAT	(i)	288,145.	94,088.	804.	18,503.	27,308.	428,848.	
		(ii)	0.	0.	0.				
11	STACIELLEN MISCHER ASSOCIATE GENERAL COUNSEL	(i)	265,917.	84,619.	430.	18,503.	24,379.	393,848.	
		(ii)	0.	0.	0.				
12	STACEY MILKOVICH CHIEF EXECUTIVE, PRO TENNIS	(i)	391,528.	0.	5,913.		26,310.	423,751.	
		(ii)	0.	0.	0.				
13	DANIEL MALASKY GENERAL COUNSEL	(i)	274,706.	97,785.	180.	18,503.	26,853.	418,027.	
		(ii)	0.	0.	0.				
14		(i)							
		(ii)							
15		(i)							
		(ii)							
16		(i)							
		(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

EMPLOYEE EXPENSES

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.

SEVERANCE PAYMENT - MARY SUE HUNT RECEIVED A PAYMENT PURSUANT TO A CONTRACT \$317,308.

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2016

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**

▶ **Attach to Form 990 or Form 990-EZ.**

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

Open To Public Inspection

Name of the organization

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization, ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

1	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
				(1)									
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
Total ▶							\$						

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

1	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part IV Business Transactions Involving Interested Persons.

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

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
					Yes	No
(1)	J. WILLIAMS, KEY EMPL, TEN. MEDIA C	FORMER DIRECTOR		PUBLISH MEMBERSHIP MAGAZINE		
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

Part V Supplemental Information

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED STATES TENNIS ASSOCIATION INCORPORATED

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.

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

OMB No. 1545-0047

2016

**Open to Public
Inspection**

Employer identification number

13-5459420

PART III, LINES 4A, 4B AND 4C

LINE 4(A) 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 SEVERAL 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. IT IS A MAJOR EXPECTATION OF THE US OPEN THAT THE FANS' ENTHUSIASM AND EXCITEMENT FOR THE EVENT WILL ENCOURAGE THEIR INTEREST IN TENNIS AND DRIVE PARTICIPATION IN THE SPORT. AS THE PREMIER SHOWCASE FOR TENNIS IN THE UNITED STATES, THE US OPEN USES ITS WORLD-WIDE STAGE TO HELP GROW THE GAME. THE 2016 US OPEN KICKED OFF WITH THE 21ST ANNUAL ARTHUR ASHE KIDS' DAY, THE WORLD'S LARGEST SINGLE-DAY, GRASS-ROOTS TENNIS AND ENTERTAINMENT EVENT; HELD IN HONOR OF ARTHUR ASHE, THE EVENT CONTINUES ASHE'S MISSION OF USING TENNIS AS A MEANS TO INSTILL IN CHILDREN THE VALUES OF HUMANITARIANISM, LEADERSHIP, AND EXCELLENCE. THE MORNING GROUNDS FESTIVAL OF THE 2016 ARTHUR ASHE KIDS' DAY FEATURED

Name of the organization UNITED STATES TENNIS ASSOCIATION INCORPORATED	Employer identification number 13-5459420
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KID-FRIENDLY TENNIS PROGRAMMING THROUGHOUT THE GROUNDS AND WAS FREE TO THE PUBLIC, AND WAS FOLLOWED BY A STADIUM SHOW FEATURING A LINEUP OF TENNIS GREATS AND MUSICAL GUESTS. A NEW CHAPTER IN TOURNAMENT HISTORY GOT UNDERWAY AS THE 2016 US OPEN UNVEILED A SERIES OF PHYSICAL IMPROVEMENTS AND UPGRADES THROUGHOUT THE GROUNDS OF THE USTA BILLIE JEAN KING NATIONAL TENNIS CENTER, INCLUDING A RETRACTABLE ROOF OPERATIONAL OVER ARTHUR ASHE STADIUM, AN 8,125-SEAT GRANDSTAND STADIUM, AND ENHANCED SOUTHERN FIELD COURT SEATING. THE 2016 US OPEN DREW 688,542 FANS, WITH SINGLE-DAY ATTENDANCE RECORDS ESTABLISHED ON THREE CONSECUTIVE DAYS. ESPN SERVED FOR THE SECOND YEAR AS THE US OPEN'S EXCLUSIVE DOMESTIC MEDIA PARTNER. ESPN/ESPN2 AVERAGED 881,000 MILLION VIEWERS AND ACHIEVED A TOTAL AUDIENCE REACH OF NEARLY 42 MILLION VIEWERS IN THE U.S. THE MEN'S SINGLES FINAL AFTERNOON WINDOW RANKED AS THE HIGHEST-RATED AND MOST-VIEWED TENNIS TELECAST FROM THE 2016 US OPEN, DRAWING 1.6 MILLION VIEWERS. WORLDWIDE, THE TOURNAMENT WAS BROADCAST IN 201 COUNTRIES AND TERRITORIES, GENERATING 75,227 HOURS OF COVERAGE, INCLUDING 61,906 LIVE HOURS. FOR THE SEVENTH CONSECUTIVE SEASON, THE US OPEN NATIONAL PLAYOFFS HELPED MAKE THE US OPEN TRULY "OPEN" BY PROVIDING THE OPPORTUNITY FOR ALL PLAYERS 14 YEARS OF AGE AND OLDER TO EARN A BERTH INTO THE US OPEN. THE 2016 US OPEN ALSO EXPANDED ON THE TOURNAMENT'S COMPREHENSIVE "GREEN" INITIATIVES AND CONTINUED TO MAKE THE US OPEN ONE OF THE EASIEST PLACES TO BE ECO-FRIENDLY AND ENVIRONMENTALLY SENSITIVE, FROM RECYCLING TO ENERGY MANAGEMENT. 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

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DESIGNED TO HELP PEOPLE LEARN THE GAME, PLAY THE GAME, AND TAKE ADVANTAGE OF ITS MANY HEALTH, FITNESS, AND SOCIAL BENEFITS. YOUTH TENNIS, JUNIOR TENNIS, AND ADULT TENNIS ARE ALL MANAGED WITHIN COMMUNITY TENNIS, WHICH COVERS EVERY STEP ALONG THE PLAY PATHWAY--FROM STARTING OUT WITH YOUTH TENNIS, NO-CUT HIGH SCHOOL PROGRAMS, LOCAL JUNIOR TOURNAMENTS AND JUNIOR COMPETITION, COLLEGE TENNIS (COLLEGIATE VARSITY TENNIS AND USTA TENNIS ON CAMPUS), USTA LEAGUE, AND USTA SANCTIONED TOURNAMENTS FOR ALL AGES UP TO 90 AND OVER. COMMUNITY TENNIS WORKS WITH THE USTA'S 17 INDEPENDENTLY GOVERNED GEOGRAPHICAL SECTIONS ACROSS THE U.S., ALONG WITH MORE THAN TWO DOZEN NATIONAL USTA COMMITTEES(MADE UP OF LEADING VOLUNTEERS AND STAFF) AS WELL AS WITH THOUSANDS OF LOCAL VOLUNTEERS NATIONWIDE AND WITH TENNIS INDUSTRY PARTNERS ON NUMEROUS GRASS-ROOTS EFFORTS TO GROW THE GAME. THIS INCLUDES THE LARGEST INITIATIVE EVER TO STRENGTHEN THE TENNIS INFRASTRUCTURE IN PUBLIC PARKS AND SCHOOLS, INCLUDING THE BUILDING AND/OR RENOVATION OF MORE THAN 30,000 PUBLIC TENNIS COURTS. OTHER INITIATIVES INCLUDE DEVELOPING, STRENGTHENING, AND GROWING A NATIONWIDE NETWORK OF SELF-SUFFICIENT COMMUNITY TENNIS ASSOCIATIONS TO INCREASE TENNIS PARTICIPATION AT THE LOCAL LEVEL; PROMOTING AND PROVIDING DEVELOPMENT AND PLAY OPPORTUNITIES FOR PEOPLE IN WHEELCHAIRS TO BE INVOLVED IN THE SPORT OF TENNIS AS BOTH PLAYERS AND VOLUNTEERS; INTRODUCING TENNIS TO YOUTH THROUGH IN SCHOOL PHYSICAL EDUCATION CLASSES AND AFTER-SCHOOL TENNIS PROGRAMS; AND PROMOTING AND PROVIDING RECREATIONAL AND COMPETITIVE LEAGUE TEAM OPPORTUNITIES FOR PLAYERS AGE 18 TO 90+ IN THE COUNTRY'S LARGEST RECREATIONAL TENNIS LEAGUE, USTA LEAGUE. IN 2016 THE USTA COMPLETED THE BUILDING OF A NEW HOME FOR AMERICAN TENNIS--THE USTA NATIONAL CAMPUS AT

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LAKE NONA IN ORLANDO, FLA.--TO SERVE THE SPORT AT EVERY LEVEL OF PLAY AND TO DELIVER 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. WITH MORE THAN 100,000 PEOPLE EXPECTED TO MAKE USE OF THE FACILITY EACH YEAR, THE USTA NATIONAL CAMPUS PROVIDES PLAYERS, COACHES, TENNIS OFFICIALS, TENNIS PROVIDERS, AND SPECTATORS WITH AN UNPRECEDENTED PLAYING, TRAINING, AND EDUCATIONAL EXPERIENCE BY INCORPORATING THE LATEST TECHNOLOGY AND SERVING AS AN EPICENTER OF TENNIS INNOVATION. COMMUNITY TENNIS IS HOUSED ON THE SITE, ALONG WITH USTA PLAYER DEVELOPMENT AND USTA PRO CIRCUIT AND OFFICIATING DEPARTMENTS. THIS PROXIMITY HELPS MAXIMIZE THE STAFF'S ABILITY TO COLLABORATE AND INNOVATE, WHICH ENABLES THE USTA TO HAVE A GREATER IMPACT ON PROGRAMMING FOR THE SPORT AND GROWING THE GAME AT ALL LEVELS.

PART III, LINES 4A, 4B AND 4C CONT'D.

LINE (4C) PROFESSIONAL TENNIS OPERATIONS DIVISION. THE USTA PROFESSIONAL TENNIS OPERATIONS DIVISION CONSISTS OF THE US OPEN SERIES, PRO TOURNAMENTS, AND TEAM EVENTS AND INCLUDES THE OLYMPICS, DAVIS CUP AND FED CUP, PROFESSIONAL COMPETITIONS, THE USTA PRO CIRCUIT, AND THE OFFICIATING DEPARTMENT. 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

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SHOWCASE THE FUN, EXCITEMENT, AND ATHLETIC EXCELLENCE OF THE SPORT AND TO ENCOURAGE PARTICIPATION AT ALL LEVELS. AS THE RECOGNIZED NATIONAL GOVERNING BODY OF THE SPORT OF TENNIS, THE USTA IS A MEMBER OF THE U.S. OLYMPIC COMMITTEE. THE USTA COORDINATES THE UNITED STATES' TENNIS PARTICIPATION IN THE OLYMPIC GAMES AND THE PARALYMPIC GAMES, AS WELL AS THE PAN-AMERICAN GAMES. IN THE 2016 SUMMER OLYMPICS IN RIO, THE UNITED STATES WON THREE MEDALS IN TENNIS, LED BY JACK SOCK, WHO WAS THE ONLY PLAYER TO CAPTURE MORE THAN ONE MEDAL AT THE 2016 OLYMPICS. --BRINGING THE UNITED STATES' TOTAL OF OLYMPIC MEDALS IN TENNIS TO 23, INCLUDING 14 GOLD, SINCE THE SPORT WAS REINSTATED IN THE OLYMPICS IN 1988. THIS IS THE HIGHEST TOTAL OF ANY NATION. THE UNITED STATES ALSO POSTED A SOLID SHOWING IN 2016 AT THE PARALYMPIC GAMES, CAPTURING TWO MEDALS. THE UNITED STATES HAS NOW WON 17 MEDALS (SIX GOLD) SINCE THE PARALYMPIC GAMES BEGAN IN 1992. DAVIS CUP AND FED CUP ARE THE ELITE INTERNATIONAL TEAM COMPETITIONS IN PROFESSIONAL TENNIS FOR MEN AND WOMEN, RESPECTIVELY, WITH MORE THAN 130 NATIONS COMPETING IN THESE EVENTS ANNUALLY. THE UNITED STATES HAS WON THE DAVIS CUP CHAMPIONSHIP ON 32 OCCASIONS, MORE THAN ANY OTHER NATION, WHILE THE UNITED STATES FED CUP TEAM HAS WON THE FED CUP TITLE MORE THAN ANY OTHER NATION, A RECORD 17 TIMES. THE US OPEN SERIES LINKS SEVEN ATP WORLD TOUR AND WTA HARD-COURT TOURNAMENTS IN NORTH AMERICA TO THE US OPEN. THE SERIES WAS LAUNCHED IN 2004 AND MAKES IT EASIER FOR FANS TO CONNECT WITH THE GAME BY FORMING A TRUE REGULAR SEASON OF HARD-COURT TENNIS, WITH ESPN OFFERING MORE THAN 70 HOURS OF LIVE NATIONAL SERIES COVERAGE IN 2016. MEANWHILE, THE USTA PROVIDED SUPPORT IN 2016 (VIA PRIZE MONEY, GRANTS, AND OTHER MEANS) TO THE APPROXIMATELY 90

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SANCTIONED PROFESSIONAL TOURNAMENTS THAT COMPRISE THE USTA PRO CIRCUIT, THE WORLD'S LARGEST PROFESSIONAL TOUR FOR TENNIS DEVELOPMENT. THE USTA PRO CIRCUIT PROVIDES THE NEXT GENERATION OF AMERICAN CHAMPIONS WITH YEAR-ROUND OPPORTUNITIES TO DEVELOP THEIR GAME AND PLAY AGAINST WORLD-CLASS COMPETITION WITHOUT HAVING TO TRAVEL ABROAD. THE USTA'S OFFICIATING DEPARTMENT OVERSEES THE RECRUITMENT, CERTIFICATION, AND EVALUATION OF TENNIS OFFICIALS AT ALL LEVELS OF THE SPORT IN THE UNITED STATES, FROM GRASS-ROOTS TOURNAMENTS TO THE UPPER ECHELONS OF PROFESSIONAL TENNIS. BY TRAINING AND CERTIFYING QUALITY OFFICIALS WHO KNOW THE RULES AND REGULATIONS FOR THEIR ON-COURT AND OFF-COURT TOURNAMENT RESPONSIBILITIES, THE USTA SEEKS TO ENSURE SMOOTH-RUNNING TOURNAMENTS WHICH ARE ESSENTIAL TO GROWING THE GAME. EACH YEAR, THE USTA CERTIFIES APPROXIMATELY 3,500 TENNIS OFFICIALS, WITH THE MAJORITY OF THEM SERVING IN A VOLUNTEER CAPACITY.

PART VI, LINES 6, 7A & 7B

THE VOTING MEMBERS OF THE ASSOCIATION ARE THE SECTIONAL ASSOCIATIONS AND DIRECT MEMBER CLUBS & ORGANIZATIONS WHO HAVE A WEIGHTED VOTE BASED ON ACTUAL MEMBERS IN THEIR GEOGRAPHIC AREA. THE VOTING MEMBERS APPROVE THE SLATE OF OFFICERS AND BOARD MEMBERS AS SUBMITTED BY THE NOMINATING COMMITTEE. IN ADDITION, THEIR RIGHTS INCLUDE APPROVING AMENDMENTS TO THE BY-LAWS AND OTHER VOTING RIGHTS PURSUANT TO NEW YORK STATE NOT-FOR-PROFIT CORPORATION LAW.

PART VI, SECTION A, LINE 11

UPON COMPLETION BY THE STAFF, THE FORM 990 IS REVIEWED BY INTERNAL AND

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EXTERNAL COUNSEL. THE FORM 990 IS REVIEWED BY USTA'S AUDIT COMMITTEE. THE FORM 990 IS ALSO DISTRIBUTED TO THE FULL BOARD OF DIRECTORS IN ADVANCE OF FILING.

PART VI, SECTION B, LINE 12C

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

PART VI, SECTION B, LINE 15

THE COMPENSATION COMMITTEE HAS RESPONSIBILITY FOR ESTABLISHING A COMPENSATION STRATEGY AND SETTING THE COMPENSATION OF THE EXECUTIVE

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DIRECTOR, HIS/HER DIRECT REPORTS, AND ANY OTHER HIGHLY COMPENSATED INDIVIDUALS DESIGNATED BY THE COMPENSATION COMMITTEE, PART OF WHICH INCLUDES THE EXECUTIVE DIRECTOR AND CHIEF OPERATING OFFICER; CHIEF ADMINISTRATIVE OFFICER AND GENERAL COUNSEL; THE CHIEF FINANCIAL OFFICER; CHIEF OFFICER OF PRO TENNIS; THE CHIEF EXECUTIVE OFFICER, COMMUNITY TENNIS & USTA NATIONAL CAMPUS; THE CHIEF REVENUE OFFICER; THE CHIEF MARKETING OFFICER; THE CHIEF PROFESSIONAL TENNIS OFFICER, US OPEN TOURNAMENT DIRECTOR; AND THE CHIEF DIVERSITY AND INCLUSION OFFICER. THE COMPENSATION COMMITTEE MEETS A MINIMUM OF FOUR TIMES PER YEAR AND CONTEMPORANEOUSLY MAINTAINS MINUTES OF ITS MEETINGS. COMPENSATION AND INCENTIVE PLAN LEVELS ARE SET BY THE COMMITTEE FOLLOWING REVIEW OF APPROPRIATE COMPARABILITY DATA. APPROPRIATE COMPARABILITY DATA INCLUDES, BUT IS NOT LIMITED TO, (I) INFORMATION REGARDING COMPENSATION PAID BY SIMILAR ORGANIZATIONS FOR SIMILAR SERVICES, (II) THE AVAILABILITY OF SIMILAR SERVICES IN THE ORGANIZATION'S GEOGRAPHIC AREA, AND (III) COMPENSATION SURVEYS COMPILED BY INDEPENDENT FIRMS. THE REVIEW DESCRIBED ABOVE WAS CONDUCTED, WITH RESPECT TO COMPENSATION FOR THE ABOVE-NOTED INDIVIDUALS, IN 2016.

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.ETHICSPPOINT.COM UNDER THE WEBSITE DESIGNED FOR THE ASSOCIATION AND IS ALSO AVAILABLE UPON REQUEST FROM THE ASSOCIATION'S LEGAL DEPARTMENT.

PART XI, LINES 5 AND 9

THE AMOUNT ON LINE 5 REPRESENTS THE NET CHANGE IN UNREALIZED LOSS ON

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INVESTMENTS WHICH IS INCLUDED IN THE ASSOCIATION'S AUDITED CONSOLIDATED FINANCIAL STATEMENTS BUT NOT IN THE FORM 990. THE AMOUNT ON LINE 9 REPRESENTS THE USTA'S NONCONTROLLING INTEREST IN A TENNIS TOURNAMENT THAT WAS SOLD IN 2015.

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 693,000 INDIVIDUAL MEMBERS, 8,600 ORGANIZATIONAL MEMBERS AND A PROFESSIONAL STAFF AND VOLUNTEERS DEDICATED TO GROWING THE GAME.

ATTACHMENT 2

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

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
THE TENNIS MEDIA COMPANY PO BOX 220 PACIFIC PALISADES, CA 90272	PUBLISHING	2,090,590.
ALORICA INC. 8151 PETERS ROAD PLANTATION, FL 33324	MEMBER CALL CENTER	1,487,275.
DELOITTE CONSULTING LLP 4022 SELLS DRIVE HERMITAGE, TN 37076	DIGITAL CONSULTING	4,979,812.
WUNDERMAN LLC 3 COLUMBUS CIRCLE NEW YORK, NY 10019	MARKETING	2,800,517.

Name of the organization UNITED STATES TENNIS ASSOCIATION INCORPORATED	Employer identification number 13-5459420
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ATTACHMENT 2 (CONT'D)

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

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
HORIZON MEDIA INC 75 VARICK STREET NEW YORK, NY 10013	DIGITAL MEDIA	1,366,595.

ATTACHMENT 3

FORM 990, PART VIII - INVESTMENT INCOME

<u>DESCRIPTION</u>	<u>(A) TOTAL REVENUE</u>	<u>(B) RELATED OR EXEMPT REVENUE</u>	<u>(C) UNRELATED BUSINESS REV.</u>	<u>(D) EXCLUDED REVENUE</u>
INTEREST AND DIVIDENDS, NET	1,506,481.	1,506,481.		
TOTALS	<u>1,506,481.</u>	<u>1,506,481.</u>		

ATTACHMENT 4

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>COST OR FMV</u>
SECURITIES - MUTUAL FUNDS	52,791,984.	FMV
TOTALS	<u>52,791,984.</u>	

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2016

**Open to Public
Inspection**

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

▶ **Attach to Form 990.**

▶ **Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.**

Department of the Treasury
Internal Revenue Service

Name of the organization

UNITED STATES TENNIS ASSOCIATION INCORPORATED

Employer identification number

13-5459420

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) US OPEN SERIES, LLC 70 W. RED OAK LANE WHITE PLAINS, NY 10604 20-0984914	TENNIS	DE	3,018,362.	186,766.	USTA
(2) TENNIS RENDEZVOUS, LLC 70 W. RED OAK LANE WHITE PLAINS, NY 10604 46-5566771	TENNIS	DE	0.	10,290.	USTA
(3)					
(4)					
(5)					
(6)					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) USTA NATIONAL TENNIS CENTER, INC. 70 W. RED OAK LANE WHITE PLAINS, NY 10604 13-2946690	TENNIS	NY	501(C)(3)	10	USTA		X
(2) USTA FOUNDATION, INC 70 W. RED OAK LANE WHITE PLAINS, NY 10604 13-3782331	GRANT GIVING	NY	501(C)(3)	7	USTA		X
(3) USTA PLAYER DEVELOPMENT INCORPORATED 70 W. RED OAK LANE WHITE PLAINS, NY 10604 27-1368195	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) 2016

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) CINCINNATI TENNIS, LLC 26-4273 70 W. RED OAK LANE WHITE PLAIN	TENNIS TOURNA	DE	USTA		80.	80.		X				80.0000
(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 entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

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

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

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) USTA PLAYER DEVELOPMENT INCORPORATED (PD)	B	20,248,021.	CASH
(2) CINCINNATI TENNIS LLC	D	6,677,046.	CASH
(3) USTA NATIONAL TENNIS CENTER INC (NTC)	K	1,854,816.	CASH
(4) USTA FOUNDATION INCORPORATED "FOUNDATION"	N	452,118.	CASH
(5) FOUNDATION	O	1,629,252.	CASH
(6) FOUNDATION	B	535,443.	CASH

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

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

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	
b Gift, grant, or capital contribution to related organization(s)	1b	
c Gift, grant, or capital contribution from related organization(s)	1c	
d Loans or loan guarantees to or for related organization(s)	1d	
e 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	
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	
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	
o Sharing of paid employees with related organization(s)	1o	
p 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)	1s	

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) FOUNDATION	Q	593,780.	CASH
(2) NTC - SEE SCHEDULE R - PART VII	N/O		
(3) PD - SEE SCHEDULE R - PART VII	O		
(4)			
(5)			
(6)			

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

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

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

Part VII Supplemental Information

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

TRANSACTIONS WITH RELATED ORGANIZATIONS

LINE 1N - PURSUANT TO THE 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 US OPEN AGREEMENT, NTC HAS THE RIGHT TO COLLECT TICKET AND OTHER US OPEN RELATED REVENUE. LINE 1O - EXECUTIVE AND ADMINISTRATIVE STAFF OF USTA PROVIDE ASSISTANCE TO USTA NATIONAL TENNIS CENTER INC. AT NO CHARGE. LINE 1O - EXECUTIVE AND ADMINISTRATIVE STAFF OF USTA PROVIDE ASSISTANCE TO USTA PLAYER DEVELOPMENT INC. AT NO CHARGE.