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Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

2008

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements

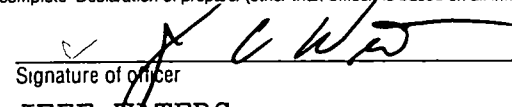
A For the 2008 calendar year, or tax year beginning DEC 1, 2008 and ending NOV 30, 2009

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type: See Specific Instructions	C Name of organization USTA NEW ENGLAND, INC Doing Business As		D Employer identification number 04-6006570
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 110 TURNPIKE ROAD		E Telephone number 508-366-3450
City or town, state or country, and ZIP + 4 WESTBOROUGH, MA 01581		F Name and address of principal officer JEFF WATERS SAME AS C ABOVE		G Gross receipts \$ 2,889,438.
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (4) ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		J Website: WWW.NEWENGLAND.USTA.COM		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1991 M State of legal domicile: MA	

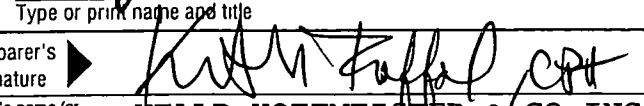
Part I Summary		Prior Year	Current Year
1 Briefly describe the organization's mission or most significant activities <u>PROMOTING THE DEVELOPMENT OF TENNIS AS A LIFETIME SPORT.</u>			
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets			
3	Number of voting members of the governing body (Part VI, line 1a)	3	28
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	28
5	Total number of employees (Part V, line 2a)	5	20
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	54,881.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
8 Contributions and grants (Part VIII, line 11)		1,420,519.	1,416,449.
9 Program service revenue (Part VIII, line 20)		560,202.	1,061,234.
10 Investment income (Part VII, column (A), lines 3-4, and 7c)		80,479.	16,874.
11 Other revenue (Part VII, column (A), lines 5, 6d, 8c, 9d, 10c, and 11e)		572,276.	149,881.
12 Total revenue - add lines 8 through 11 (must equal Part VII, column (A), line 12)		2,633,476.	2,644,438.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		255,991.	321,346.
14 Benefits paid to or for members (Part IX, column (A), line 4)			
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,168,424.	1,254,815.
16a Professional fundraising fees (Part IX, column (A), line 11e)			
16b Total fundraising expenses (Part IX, column (D), line 25) ▶			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		1,147,083.	1,042,049.
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		2,571,498.	2,618,210.
19 Revenue less expenses Subtract line 18 from line 12		61,978.	26,228.
20 Total assets (Part X, line 16)		Beginning of Year	End of Year
21 Total liabilities (Part X, line 26)		1,630,780.	1,869,182.
22 Net assets or fund balances. Subtract line 21 from line 20		303,170.	314,777.
		1,327,610.	1,554,405.

Part II Signature Block

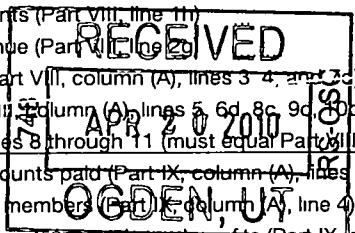
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here:  Date: 3-29-2009

Signature of officer: JEFF WATERS
 Type or print name and title

Paid Preparer's Use Only: Preparer's signature:  Date: 3/16/10
 Firm's name (or yours if self-employed), address, and ZIP + 4: HEALD HOFFMEISTER & CO INC, 105 CHESTNUT ST, NEEDHAM, MA 02492
 Check if self-employed:
 Preparer's identifying number (see instructions):
 EIN:
 Phone no.: 7814493343

SCANNED MAY 17 2009, Activities & Governance



12512

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:
PROMOTING THE DEVELOPMENT OF TENNIS AS A LIFETIME SPORT.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
If "Yes", describe these new services on Schedule O. [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?
If "Yes", describe these changes on Schedule O [] Yes [X] No

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 2,198,509. including grants of \$ 321,346.)(Revenue \$ 1,051,137.)
USTA/NEW ENGLAND INC. SANCTIONED TENNIS EVENTS, CONDUCTED TENNIS TOURNAMENTS, ADMINISTERED TENNIS LEAGUES AND INFORMED, EDUCATED AND COMMUNICATED WITH ITS MEMBERS.

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

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

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

4e Total program service expenses \$ 2,198,509. (Must equal Part IX, Line 25, column (B).)

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 Schedule B, Schedule of Contributors?	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? <i>If "Yes," complete Schedule C, Part II</i>		
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any accounts where 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, 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 hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
13 Is the organization a school as 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 U.S.?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total 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 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
21 Did the organization report more than \$5,000 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 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, questions 3, 4, or 5? <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 questions 24b-24d and complete Schedule K. If "No," go to question 25</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) and 501(c)(4) 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>		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <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, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <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, Parts II, III, IV, and V, line 1</i>		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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

Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1a	23		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a	20		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
9b			
10	Section 501(c)(7) organizations. Enter: N/A		
a	Initiation fees and capital contributions included on Part VIII, line 12		
10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
10b			
11	Section 501(c)(12) organizations. Enter: N/A		
a	Gross income from members or shareholders		
11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A		
12b			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
1a Enter the number of voting members of the governing body		28
b Enter the number of voting members that are independent		28
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?	X	
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9a Does the organization have local chapters, branches, or affiliates?		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a The organization's CEO, Executive Director, or top management official?	X	
b Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	X	
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► NONE
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►
JEFF WATERS - 508-366-5805
110 TURNPIKE ROAD, WESTBOUGH, MA 01581

Part VIII Statement of Revenue			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	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	1416449.				
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f		1,416,449.				
	Program Service Revenue	2 a USER FEES	Business Code 711300	618,717.	618,717.		
		b					
c							
d							
e							
f All other program service revenue		713990	442,517.	442,517.			
g Total. Add lines 2a-2f			1,061,234.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		16,874.			16,874.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross Rents	(i) Real	340,000.				
		(ii) Personal					
		b Less rental expenses	245,000.				
		c Rental income or (loss)	95,000.				
	d Net rental income or (loss)		95,000.	95,000.			
	7 a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
		b Less cost or other basis and sales expenses					
		c Gain or (loss)					
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
		b Less direct expenses	b				
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities See Part IV, line 19	a						
	b Less direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a YEARBOOK ADVERTISING	541800	52,338.		52,338.			
b CHARGE CARD FEES	900099	2,543.		2,543.			
c							
d All other revenue							
e Total. Add lines 11a-11d		54,881.					
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		2,644,438.	1,156,234.	54,881.	16,874.		

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) but are not required to complete columns (B), (C), and (D).

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 governments and organizations in the U.S. See Part IV, line 21	281,612.	281,612.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	39,734.	39,734.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	997,891.	997,891.		
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	68,530.	68,530.		
9 Other employee benefits	102,637.	102,637.		
10 Payroll taxes	85,757.	85,757.		
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	9,685.		9,685.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	88,314.		88,314.	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	130,789.		130,789.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,538.		6,538.	
23 Insurance	2,971.	2,971.		
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>USTA LEAGUE TENNIS</u>	317,626.	317,626.		
b <u>PLAYER DEVELOPMENT</u>	93,027.	93,027.		
c <u>US TENNIS OPEN EXPENSES</u>	76,095.		76,095.	
d <u>COMMUNITY TENNIS EXPENS</u>	71,977.	71,977.		
e <u>TENNIS HALL OF FAME EXP</u>	40,787.		40,787.	
f All other expenses _____	204,240.	136,747.	67,493.	
25 Total functional expenses. Add lines 1 through 24f	2,618,210.	2,198,509.	419,701.	0.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	360,749.	1	16,541.
	2	Savings and temporary cash investments	450,088.	2	804,145.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	20,754.	4	32,605.
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	43,572.	9	53,428.
	10a	Land, buildings, and equipment cost basis	122,781.		
	b	Less: accumulated depreciation Complete Part VI of Schedule D	117,937.	10c	4,844.
	11	Investments - publicly traded securities	744,235.	11	957,619.
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,630,780.	16	1,869,182.	
Liabilities	17	Accounts payable and accrued expenses	121,248.	17	124,292.
	18	Grants payable	83,534.	18	72,816.
	19	Deferred revenue	98,388.	19	117,669.
	20	Tax-exempt bond liabilities		20	
	21	Escrow account liability Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable		24	
25	Other liabilities Complete Part X of Schedule D		25		
26	Total liabilities. Add lines 17 through 25	303,170.	26	314,777.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	1,327,610.	27	1,554,405.
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, 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	1,327,610.	33	1,554,405.
	34	Total liabilities and net assets/fund balances	1,630,780.	34	1,869,182.

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to lines 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?	X	
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?		X
b If "Yes," did the organization undergo the required audit or audits?		

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008
Open to Public Inspection

Name of the organization **USTA NEW ENGLAND, INC** Employer identification number **04-6006570**

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

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

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

- Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	
- Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d
- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____
- Number of states where property subject to conservation easement is located ▶ _____
- Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Yes No
- Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____
- Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ _____
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- In Part XIV, 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" to Form 990, Part IV, line 8

- If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, 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) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____
- 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 relating to these items

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

3 Using the organization's 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 XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or 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 year end balance held as

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Term endowment _____ %

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

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(i), are the related organizations listed as required on Schedule R?

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

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		122,781.	117,937.	4,844.
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				4,844.

Part VII Investments - Other Securities. See Form 990, Part X, line 12

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include Financial derivatives and other financial products, Closely-held equity interests, Other, and Total.

Part VIII Investments - Program Related. See Form 990, Part X, line 13

Table with 3 columns: (a) Description of investment type, (b) Book value, (c) Method of valuation. Rows include Total.

Part IX Other Assets. See Form 990, Part X, line 15

Table with 2 columns: (a) Description, (b) Book value. Rows include Total.

Part X Other Liabilities. See Form 990, Part X, line 25

Table with 2 columns: (a) Description of liability, (b) Amount. Rows include Federal income taxes and Total.

In Part XIV, 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

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,644,438.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,618,210.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	26,228.
4	Net unrealized gains (losses) on investments	4	200,567.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4-8	9	200,567.
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	226,795.

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

1	Total revenue, gains, and other support per audited financial statements	1	2,872,564.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	245,000.
e	Add lines 2a through 2d	2e	245,000.
3	Subtract line 2e from line 1	3	2,627,564.
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 XIV)	4b	16,874.
c	Add lines 4a and 4b	4c	16,874.
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	2,644,438.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	2,863,210.
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	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	245,000.
e	Add lines 2a through 2d	2e	245,000.
3	Subtract line 2e from line 1	3	2,618,210.
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 XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	2,618,210.

Part XIV Supplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART X: THERE ARE NO TAX POSITIONS THAT NEED TO BE DISCLOSED

UNDER FIN 48

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES: 245000.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

DIVIDEND INCOME: 16874.

Part XIV Supplemental Information *(continued)*

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES: 245000.

Multiple horizontal lines for supplemental information.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047
2008

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the U.S.**

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

Open to Public
Inspection

Name of the organization: **USTA NEW ENGLAND, INC**
Employer identification number: **04-6006570**

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 Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) 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 non-cash assistance	(h) Purpose of grant or assistance
SEE ATTACHED SCHEDULE			281,612.	0.			CASH GRANTS FOR TENNIS OPERATIONS

2 Enter total number of section 501(c)(3) and government organizations: **78.**
3 Enter total number of other organizations:

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) 2008

USTA NEW ENGLAND INC
 Organization Grant List 2009

Vendor	Address line 1	Address line 2 City ST ZIP	Grant Amount
100 BLACK MEN OF STAMFORD	PO BOX 1313	STAMFORD, CT 06904-1313	750
Blackstone Valley Tennis Association	c/o Joanne Mackoud	300 E Washing North Attleboro, MA 02760	2,000
Boston Lobsters LLC	75 Cambridge Parkway	Cambridge, MA 02138-1985	3,000
Boys Club of Greater New Bedford	166 Jenney ST	New Bedford, MA 02740	3,000
Boys & Girls Club White Rvr Valley	P O Box 237	26 North Main Randolph, VT 05060	500
Bristol Parks & Recreation	C/O Patricia Tomascak	111 North Main Bristol, CT 06010	4,000
C A T C O	2433 Main St #2	Rocky Hill, CT 06067	5,000
Cardinal Sheehan Center	1494 Main St	Bridgeport, CT 06604	1,500
Cedardale Health and Fitness Club	931 Boston Post Road	Haverhill, MA 01835	200
City of Bangor	647 Main St	Bangor, ME 04401	750
Brunswick Parks & Rec Dept	30 Federal St	Brunswick, ME 04011	1,000
Holyoke Recreation Department	536 Dwight St	Holyoke, MA 01040	1,000
City of Keene	312 Washington St	Keene, NH 03431	500
City of Springfield	200 Trafton Rd	Springfield, MA 01108	2,600
Cornwall Community Tennis - T Piker	69 Kent Rd P O Box 134	C/O Todd Pike Cornwall Bridge, CT 06754	500
Dartmouth Club Tennis	Dartmouth College	6083 Alhmmi C Hanover, MA 03755	1,000
Dave & Greg's Tennis	C/O Dave Kardas	230 West Ave Milford, CT 06460	700
Fairhaven Recreation	227 Huttleston Ave	Fairhaven, MA 02719	500
Fairhaven Tennis Assoc	22 Wampanoag Drive	Fairhaven, MA	2,540
Fall River CTA	C/O Jeff Chace	P O Box 127 Fall River, MA 02722	900
Farnam Neighborhood House	162 Filmore St	New Haven, CT 06513	1,500
Franklin Park Tennis Association		P O Box 1907 Roxbury, MA 02119	2,000
Friends of Ellington Tennis		Ellington, CT 06029	2,700
Friends of Lexington Tennis Assoc		10 Plainfield S Lexington, MA 02421	1,000
Grande Meadows Athletic Club	C/O Fatemeh Mojtabai	Longmeadow, MA 01106	1,026
King St Youth Center	170 Dwight St	Burlington, VT 05402	500
King Street Youth Center	C/O Bonnie Ferro	Burlington, VT 05401	3,500
Lee CTA	87 King St	Becket, MA 01223	1,500
Lewiston Recreation Dept	200 Tyne Rd	Lewiston, ME 04240	1,300
Maine Tennis Association	65 Central Ave	Cumberland, ME 04021	12,168
Mainly Tennis	P O Box 401	York, ME 03909	1,000
Marcy's Tennis Academy LLC	62 Organug Rd	Trumbull, CT 06611	400
Marshfield Tennis Club	76 Greenbriar Rd	Marshfield, MA 02050	2,000
Martin Luther King jr Community Ctr	74 Shawmut Avenue	Springfield, MA 01109	1,000
Mashpee Leisure Services	16 Great Neck Rd	Mashpee, MA 02649	2,500
Mid Coast Maine Tennis Assc	120 Harpswell Rd	Brunswick, ME 04011	1,500
NETA	C/O Roxanne Aaron-Selph	1 Eastlake Plax Middletown, CT 06457	1,500
NEW BRITAIN PARKS AND REC	The Tennis Center	60 Prospect St Newington, CT 06109	8,500
NJTL of Western Maine	1578 Kennebec River Rd	Concord Twp, 04	1,000
New Britain Parks & Recreation	27 West Main St	New Britain, CT 06051	1,500

USTA NEW ENGLAND INC
 Organization Grant List 2009

New Haven Board of Park Commissioners	720 Edgewood Ave	Att Bob Levin New Haven, CT 06515	7,000
New Haven Parks Department	720 Edgewood Ave	New Haven, CT 06515	2,000
New Haven Youth Tennis	36 Elm St	Branford, CT 06405	1,900
Newtown Youth Academy	4 Primrose St	Newtown, CT 04670	1,500
NCTA	P O Box 2073	210 Depot St Manchester Center, VT 05255	2,100
Northwestern RI Tennis Assoc/ T Charles	22 Raymond Ave	North Providence, RI 02911	2,500
Norwalk Grassroots Tennis	15 Eastwood Rd	Norwalk, CT 06851	11,000
Oranges Southwest Supervisory Union	24 Central St	Randolph, VT 05060	500
PAWTUCKET PARKS AND REC	SLATER MEMORIAL PAR	PAWTUCKET, RI 02861	500
Pequenas Ligas Hispanas de New Haven	P O Box 954	New Haven, CT 06504	1,000
Pilot Pen Tennis	900 Chapel St	Suite 622 New Haven, CT 06510	10,978
Pittsfield Community Tennis Assoc	47 Richard Drive	Dalton, MA 01226	1,900
South Shore Initiatives	75 Fimmel Drive	Weymouth, MA 02188	2,000
Southeastern MA CTA	118 Warren St West	Raynham, MA 02767	3,000
Sportsmen's Tennis Club	950 Blue Hill Ave	C/O Ton Wille Dorchester, MA 02124	13,000
Spot Tennis	The Todd Morsilli Clay Cour	Roger William Providence, RI 02905	250
Stonington Human Services/SECCTA	188 Whitehall Ave	P O Box 76 Stonington, CT 06372	3,000
Tenacity	367 Western Ave	Brighton, MA 02135	5,000
Third Stream Communications	816 Elm St	Manchester, NH 03101	1,000
Thomaston Community Tennis	P O Box 91	Thomaston, CT 06787	160
Holderness Recreation Town	P O Box 203	Holderness, NH 03245	500
Town of Houlton (Youth Tennis Program)	21 Water St	Houlton, ME 04730	1,000
Johnston Youth Sports	1385 Hartford Ave	Johnston, RI 02919	1,200
Town of Milton	43 Bombardier Rd	Milton, VT 05468	200
Town of Oak Bluffs Park & Rec	C/O Karon Wojtkiolo	347 County R Oak Bluffs, MA 02557	1,500
Town of Sandwich	P O Box 194	Center Sandwich, NH 03227	500
Town of Somerset Rec Dept	140 Wood St	Somerset, MA 02726	300
Town of Stratford	Attn P Patusky	1 Dome Drive Stratford, CT 06615	2,500
U32 School	930 Galliston Hill Rd	Montpelier, VT 05602	20,000
USA Tennis WMA	C/O Mike Kotendo	11 Kennedy D Hadley, MA 01035	12,233
USTA Rhode Island	P O Box 462	Greenville, RI 02828	10,644
USTA Vermont	Carol Goodrum	30 Winding Bi S Burlington, VT 05403	9,747
USTA/Virginia Tennis	Attn Betty Wickersham	3229 Brannon Roanoke, VA 24018	500
USTA New Hampshire	C/O USTANE 110 Turnpike Rd	Westboro, MA 01581	11,934
USTA Eastern MA	C/O USTANE 110 Turnpike Rd	Westboro, MA 01581	26,999
USTA Connecticut	C/O USTANE 110 Turnpike Rd	Westboro, MA 01581	28,933
Van Buren Summer Tennis	107 Castonguay Road	Van Buren, ME 04785	500
Waterville Valley Tennis	P O Box 207	Waterville Valley, NH 03215	1,800
Westport DBSTC CTA/L MacMaster	354 Charlotte White Rd	Westport, MA 02790	900

281,612

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) 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
CASH GRANTS FOR TENNIS OPERATIONS SEE ATTACHED SCHEDULE	42	39,734.	0.		

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

USTA NEW ENGLAND INC
Individual Grant List - 2009

Vendor	Address line 1	Address line 2	City ST ZIP	Grant Amount
John Altschuler	3 Doval St		Milford, CT 06460	250
Igor Breytburg	71 Cricket Lane		West Roxbury, MA 02132	500
Barry Caron	Manchester Athletic Club	9 Squire Way	East Kingston, NH 03827	1,000
Todd Carpenter	The Weymouth Club	8 Atwater Ave	Manchester, MA 01944	450
Paul D'Amico	55 Nelson St	75 Finnell Drive	Weymouth, MA 02188	450
TJ Dang	10 Kalamat Farm Circle	2nd Floor	Manchester, NH 03103	500
Katherine Ellis	30 Revere Beach Pkwy#302		Shrewsbury, MA 01545	400
Doug Eng	135 Whitfield St		Medford, MA 02155	624
Russ Fleming	33 Cedar St		Roslindale, MA 02131	350
Wade Frame	75 Painter Hill Rd		Marblehead, MA 01945	2,600
Peter Francesconi	12 Ashman CT		Woodbury, CT 06798	500
Paul Gagliardi	180 Cox Rd		Branford, CT 06405	800
Miguel Garcia	23 Hunting Lodge		Portland, CT 06480	750
Allison Gazda	103 Church St	Apt 3	Storrs, CT 06269	400
Drew Goldstein	100 Birch Hill Rd		Newport, RI 02840	1,000
Molly Hahn	32 Wmter Court		Belmont, MA 02178	3,130
Wayne Harrell	15 Hyslop Rd		E Windsor, CT 06088	1,150
Mr & Mrs Hendrix	94 Beacon St #62		Brookline, MA 02445	500
Pin Pin Huang	99 Newell Rd		Somerville, MA 02143	650
Charles Joslin	27 Shea St		Newbury, NH 03255	1,000
Luke Korzekwa	4 Alec St		Brunswick, ME 04011	1,000
Tim Lacombe	77 Perry Road		Lewiston, ME 04240	500
Tom Larkin	78 Silver Head Way		North Falmouth, MA 02556	1,680
Brian Lomax	46 Greenwood Ave		Marlborough, MA 01752	2,420
Iona Lord	81 Beach Club Drive		Bloomfield, CT 06002	4,000
Brittany Judith Mailman	37 Tanglewood Dr		Freedom, NH 03836	500
Peter Lovell	140 Webster Rd		Glastonberry, CT 06033	500
Conrad McIntire	Cedardale	911 Boston Rd	Ellington, CT 06029	1,000
Adam Molda	53 Pequotette Rd		Haverhill, MA 01835	400
Jean Osachuk	2 Dexter St		Belmont, MA 02478	800
John Pelkey	5 Valley View Drive		Derry, NH 03038	500
Vladimir Pylpiv	22 Stonecrest Rd		Weatogue, CT 06089	500
Carl Reid	95 Ross Rd		Mattapan, MA 02126	750
Sharon Roundtree-Brewer	P O Box 298		Rockfall, CT 06481	750
Sherry Scheer	381 Lambert Rd		Windsor, MA 01270	1,125
Terry Schwartz	17 Beers Ave		Orange, CT 06477	500
Paul Shaw	19 Symmes Rd		Norwell, MA 02061	1,400
Thomas Shewalter	62 Davis CT		Winchester, MA 01890	750
Bonnie Steinroeder	53 Benstone St		Concord, MA 01742	800
Lisa Terenzio	65 Long Meadow Hill Rd		Stamford, CT 06905	1,600
Alan Turner	Oak Bluffs Park and Rec	P O Box 1094	Brookfield, CT 06804	1,055
Karen Wojtkielo			Oak Bluffs, MA 02557	200
				39,734

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

USTA NEW ENGLAND, INC

Employer identification number

04-6006570

FORM 990, PART VI, SECTION A, LINE 6: EVERY ORGANIZATION THAT JOINS USTA NEW ENGLAND INC. BECOMES A VOTING MEMBER FOR THAT YEAR.

FORM 990, PART VI, SECTION A, LINE 7A: EVERY MEMBER IS ALLOWED TO VOTE FOR THE MEMBERS OF THE BOARD OF DIRECTORS. A SLATE OF THE BOARD IS MAILED TO THE MEMBERS WITH THE DATE, TIME AND LOCATION OF THE ELECTION.

FORM 990, PART VI, SECTION A, LINE 7B: ALL MEMBERS ARE INVITED TO ATTEND THE ANNUAL MEETING AND VOTE ON ITEMS THAT REQUIRE ACTION BY THE MEMBERS

FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 WAS AVAILABLE FOR THE BOARD TO REVIEW BEFORE SIGNING AND WAS REVIEWED BY THE TREASURER BEFORE SIGNING.

FORM 990, PART VI, SECTION B, LINE 12C: THE PRESIDENT EXAMINES THE CONFLICT OF INTEREST DISCLOSURES PREPARED BY BOARD MEMBERS ON AN ANNUAL BASIS. THE PRESIDENT ALSO REMINDS THE BOARD MEMBERS AT THE BEGINNING OF EACH BOARD MEETING TO REPORT ANY CHANGES IN THEIR SITUATION.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS MEETS ONCE A YEAR TO REVIEW AND DETERMINE THE APPROPRIATE LEVEL OF COMPENSATION FOR THE ORGANIZATION'S EXECUTIVE DIRECTOR. THE ORGANIZATION ALSO CONTRACTED WITH AN OUTSIDE COMPANY DURING THE YEAR TO REVIEW THE SALARIES PAID TO THE EXECUTIVE DIRECTOR AND TO THE OTHER EMPLOYEES

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING

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

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

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Name of the organization **USTA NEW ENGLAND, INC** Employer identification number **04-6006570**

DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

THE AUDIT COMMITTEE REVIEWS WITH THE INDEPENDENT AUDITORS THE RESULTS OF THE AUDIT.

2008 DEPRECIATION AND AMORTIZATION REPORT
 FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Use No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	MANAGEMENT AND GENERAL OFFICE FURNITURE AND EQUIPMENT	VARIABLES		.000	16	104,136.			104,136.	92,754.		6,538.
2	VAN	050400	SL	5.00	16	18,645.			18,645.	18,645.		0.
	* 990 PAGE 10 TOTAL							0.	122,781.	111,399.	0.	6,538.
	MANAGEMENT AND GENERAL					122,781.		0.	122,781.	111,399.	0.	6,538.
	* GRAND TOTAL 990 PAGE 10 DEPR					122,781.		0.	122,781.	111,399.	0.	6,538.

828102 04-25-08 (D) - Asset disposed * ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

USTA New England Inc
List of Board Members
Westboro, Massachusetts
04-6006570

Name	Address
Officers	
Ronald Friedman	President
R Gary Pina	1st Vice President
Keith Collar	Vice President
William Ballen	Vice President
Joan Wulfson	Secretary
Scott Steinberg	Treasurer
Board Members	
Peter Parrotta	177 Stonehill Drive, Rocky Hill, CT 06067
Hyacinth Crichlow	70 Meadowview Road, Milton, MA 02186
Mike Kolendo	11 Kennedy Drive, Hadley, MA 01035
Karen Ferguson	53 Mitton Street, Portland, ME 04102
Gary Faltin	7 Constable Road, Durham, NH 03824
Mike Gorman	31 Greenlake Drive, Greenville, RI 02828
Diane Meyer	1102 Spear Street, South Burlington, VT 05403
Carlos Aldave	32 Sunset Terrace, West Hartford, CT 06107
Danne Davis	7 Thane Street, Boston, MA 02124
Peter Parrotta	P O Box 220, Agawam, MA 01001
Rita McCarthy	33 Truman Way, Rocky Hill, CT 06067
Karen O'Sullivan	One Cityview Lane, #315, Quincy, MA 02169
George Robbins	P. O. Box 160, New Harbor, ME 04554
Marcy Rubinstein	76 Greenbrier Road, Trumbull, CT 06611
Amy Wishingrad	Choate Rosemary Hall, 333 Christian Street, Wallingford, CT 06492
Patricia Decker	Middlebury Racquet Club, Box 365, Middlebury, CT 06762
Jack Schubert	187 Sawmill Road, West Springfield, MA 01089
Robert Greene	P. O. Box 1099, Rangeley, ME 04970
Leo F. Power, Jr.	8 Browne Street, Unit 1, Brookline, MA 02446
Jack Moter	18 Glen Road, Winchester, MA 01890
Brenda Sharton	Goodwin Proctor-Exchange Place, Boston, MA 02109