

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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 black lung benefit trust or private foundation)

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

OMB No 1545-0047

2009

Open to Public Inspection

4 Fo	r the 2	2009 calendar ye		-2009 and ending 12-31-200	9	D Employer ide	entification number
	eck if ap dress cha	pplicable Please use IRS	C Name of organization INTERNATIONAL TENNIS HALL OF	FAME INCORPORATED			
_	dress cha me chan	label or	Doing Business As			13-614435 E Telephone nu	
_	me cnan tial retur	type. See				(401) 849-	3990
_	minated	Instruc-	Number and street (or P O box 1 194 BELLEVUE AVENUE	f mail is not delivered to street addre	ss) Room/suite	G Gross receipts	\$ 9,966,464
_	ended r		City or town, state or country, ar	nd ZIP + 4			
_		pending	NEWPORT, RI 02840	· ·			
*1			 ime and address of principal of	īcer	H(a) Ic th	ıs a group returı	n for
		MARK	CLSTENNING		affilia		⊤Yes ▼ No
			SELLEVUE AVENUE ORT, RI 02840		H(b) Are al	I affiliates includ	led?
					1		(see instructions)
Та	x-exem	pt status 🔽 501(c) (3) ◀ (ınsert no)	1) or 527	H(c) Grou	ip exemption nu	ımber ►
W	ebsit e	: 🕨 www tennisfa	me com				
(For	m of org	anization 🔽 Corpora	ation Trust Association Othe	r 🏲	L Year of fo	rmation 1951	State of legal domicile RI
Pa	rt I	Summary					
			he organization's mission or mo HE HISTORY AND HERITAGE	_	PUBLIC AND	CONSERVET	HE NEWPORT
ų			IONAL HISTORIC LANDMAR	•			
sovemance							
≣							
5	2	Check this box 🕨	f the organization discontin	ued its operations or disposed	of more than	25% of its net a	assets
	3	Number of voting	members of the governing bod	y (Part VI, line 1a)		3	62
ACUMURS &	4	Number of indepe	endent voting members of the g	overning body (Part VI, line 1t)		59
ļ	5	Total number of e	mployees (Part V, line 2a) .			5	112
3	6	Total number of v	olunteers (estimate if necessa	ry)		6	150
•	7a	Total gross unrel	ated business revenue from Pa	rt VIII, column (C), line 12		7a	46,993
	ь	Net unrelated bus	siness taxable income from For	m 990-T, line 34		71	18,451
a,					Prio	or Year	Current Year
	8		nd grants (Part VIII, line 1h)			1,994,530	1,750,682
êu î	9		e revenue (Part VIII, line 2g)		2,789,217	3,298,401	
Revenue	10		ome (Part VIII, column (A), line		-5,963,081	1,510,042	
	11		Part VIII, column (A), lines 5, add lines 8 through 11 (must e			491,707	242,04
	12		· · · · · · · · · · · · ·		e	-687,627	6,801,165
	13		lar amounts paıd (Part IX, colu			15,650	24,370
	14	Benefits paid to	or for members (Part IX, colum	nn (A), line 4)			0
82	15	Salaries, other of 10)	compensation, employee benef	ts (Part IX, column (A), lines 5	5 –	2,241,157	2,206,139
Expenses	16a	•	draising fees (Part IX, column	(A), line 11e)		64,253	69,725
ੜੇ	b	Total fundraising ex	penses (Part IX, column (D), line 25)	4 70,602			
	17	Other expenses	(Part IX, column (A), lines 11	a-11d, 11f-24f)		3,874,319	3,455,727
	18	Total expenses	Add lines 13-17 (must equal	Part IX, column (A), line 25)		6,195,379	5,755,961
	19	Revenue less ex	openses Subtract line 18 from	line 12		-6,883,006	1,045,204
net Assets or Fund Balances						g of Current 'ear	End of Year
10 mg	20	Total assets (Pa	art X, line 16)		—	32,898,829	38,601,360
5 B	21		(Part X, line 26)			749,697	870,175
25	22		nd balances Subtract line 21			32,149,132	37,731,185
Pai	rt II	Signature B	lock			'	
			perjury, I declare that I have examine				
		and belief, it is true,	, correct, and complete Declaration o	т ртератет (отнет тнап отноет) is base	u on an miormat	on or which prepar	er назану кноwledge
Sign		*****				11-11	
ler	е	Signature of office	cer		Date		
		MARK L STENNI					
		Type or print nai	me and title				
_		Preparer's Signature Craig	Klein		Check If self-	Preparer's identifications	
Paid		oignatare p		1	empolyed 🕨 🦵	,	
-	arer's	Firm's name (or you if self-employed),	rs CBIZ Tofias			EIN Þ	
JSE (Only	address, and ZIP +	4 350 Massachusetts Avenue				
			Cambridge, MA 02139			Phone no 🕨 (6	
4		~ 4	urn with the preparer shown ab	3 ()	_		✓ Yes 「No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

THE INTERNATIONAL TENNIS HALL OF FAME IS A NON-PROFIT INSTITUTION DEDICATED TO PRESERVING THE HISTORY OF TENNIS, INSPIRING AND ENCOURAGING JUNIOR TENNIS DEVELOPMENT, ENSHRINING TENNIS HEROES AND HEROINES AND PROVIDING A LANDMARK FOR TENNIS ENTHUSIASTS WORLDWIDE

						☐ Yes No
	If "Yes," describe thes	e changes on Schedu	ıle O			
4		501(c)(4) organizati	ions and section 494	47(a)(1) trusts are re	est program services by equired to report the amo ice reported	
4a	(Code) (Expenses \$	1,683,610 ınclud	ling grants of \$) (Revenue \$	1,433,117)
	AND \$500,000 IN PRIZE M TOURNAMENT IS ONE OF : CHAMPIONS CUP IS ONE O	ONEY IN THE HISTORIC O L5 NORTH AMERICAN STO DF EIGHT STOPS ON THE O R FOUR DAYS FOR \$150,0	GRASS COURTS OF THE ID DPS ON THE ATP WORLD T OUTBACK CHAMPIONS SE 000 IN PRIZE MONEY PA	NTERNATIONAL TENNIS H TOUR AND, OF THOSE, T ERIES INTERNATIONAL TO	AYERS IN THE WORLD COMPE HALL OF FAME HELD THE WEE HE ONLY TO BE PLAYED ON G DUR THE TOURNAMENT FEAT DED HALL OF FAMERS JIM CO	K AFTER WIMBLEDON, THE RASS THE HALL OF FAME JRES EIGHT FORMER TOP 10
	(Code) (Expenses \$	725,796 includ	ling grants of \$) (Revenue \$	903,141)
-	Tennis COURTS - THE INT PUBLIC CAN ACTUALLY PLA PLAY TENNIS ON THE HALL CHAMPIONS PAST AND PR	ERNATIONAL TENNIS HALL YY THE SPORT - TENNIS - . OF FAME'S LEGENDARY (ESENT HAVE GRACED THE IROE, BJORN BORG, TON	L OF FAME IS TRULY UNIG ON HALL OF FAME GROU GRASS COURTS, WHERE E HALL OF FAME'S GRASS Y TRABERT, VIRGINIA WA	QUE IN THAT IT IS ONE OUT IN THAT IT IS ONE OUT IN THE FIRST US NATIONAL COURTS INCLUDING BIL	OF THE ONLY HALL OF FAME SI Y AGE AND ANY ABILITY LEVEL AL TENNIS CHAMPIONSHIPS W LIE JEAN KING, ROD LAVER, E	ERE HELD IN 1881 TENNIS
4c	(Code) (Expenses \$	908,733 ınclud	ling grants of \$) (Revenue \$	560,338)
	•	ERNATIONAL TENNIS HAL	L OF FAME & MUSEUM (I TIONAL LAWN TENNIS HA	ITHF&M) WAS ESTABLISH	ED IN 1954 AT THE NEWPORT	CASINO AS A "SHRINE TO THE
	FAME BY THE INTERNATIO CONSIDERATION GIVEN TO CONTRIBUTOR A SERIES INDUCTION CEREMONY OF NEWPORT CASINO, WAS B NATIONAL HISTORIC LAND GROWTH AND DEVELOPME FAMERS, FROM OUR FIRST DEVELOPMENTS OF THE G.	NAL TENNIS FEDERATION O SPORTSMANSHIP AND CO OF VOTING PANELS REPR CCURS ON BILL TALBERT UILT BY JAMES GORDON MARK IN 1987 THE HIST INT OF TENNIS THROUGH T CLASS IN 1955 TO TOD, AME THE EXHIBITS ARE I HITE'S ARCHITECTURAL D	I INDIVIDUALS ARE ELECT CHARACTER INDIVIDUALS ESENTING THE INTERNAT CENTER COURT DURING BENNETT IN 1880, WAS I ORIC NEWPORT CASINO I THE 20TH CENTURY, WI AY, ARE TOLD THROUGHC DRAMATICALLY SET IN TH DETAIL THE WOOLARD FA	IN 1986, WE ACHIEVED VITED BASED ON THEIR RES ARE ELECTED IN ONE CITIONAL TENNIS COMMUNISTHE CAMPBELL'S HALL ODESIGNED BY THE ARCHITS AN UNCOMMON EXAMITH A PARTICULAR EMPHOUT THE GALLERIES PROHEILS PROMILY ENSHRINEMENT GAMILY ENSHRINEMENT GAMED	VORLDWIDE RECOGNITION AS CORDS OF COMPETITIVE ACH FETHREE CATEGORIES RECEITY VOTE TO ELECT THESE IN FEAME CHAMPIONSHIPS THE TECTURAL FIRM MCKIM, MEAPLE OF SPORTING EXCELLENCY ASIS ON ITS CULTURAL IMPACUTION PERSONAL INSIGHT IN THE NEWPORT CASINO, WHEF	THE SPORT'S OFFICIAL HALL OF IEVEMENT, WITH ANCILLARY NT PLAYER, MASTER PLAYER, AND DIVIDUALS FOR INDUCTION THE MUSEUM, HOUSED IN THE D & WHITE AND DECLARED A SE THE EXHIBITS HIGHLIGHT THE THE STORIES OF OUR HALL OF
4d	FAME BY THE INTERNATIO CONSIDERATION GIVEN TO CONTRIBUTOR A SERIES INDUCTION CEREMONY OF NEWPORT CASINO, WAS B NATIONAL HISTORIC LAND GROWTH AND DEVELOPME FAMERS, FROM OUR FIRST DEVELOPMENTS OF THE GO DELIGHT IN STANFORD WI	NAL TENNIS FEDERATION O SPORTSMANSHIP AND COF VOTING PANELS REPR CCURS ON BILL TALBERT UILT BY JAMES GORDON MARK IN 1987 THE HIST INT OF TENNIS THROUGH T CLASS IN 1955 TO TOD AME THE EXHIBITS ARE I HITE'S ARCHITECTURAL D TENNIS WHO HAVE BEEN	I INDIVIDUALS ARE ELECTHARACTER INDIVIDUALS ESENTING THE INTERNAT CENTER COURT DURING BENNETT IN 1880, WAS IT ORIC NEWPORT CASINO ITHE 20TH CENTURY, WIAY, ARE TOLD THROUGHD CORAMATICALLY SET IN THE DETAIL THE WOOLARD FAN INDUCTED INTO THE HARMAGINA OF THE HARMA	IN 1986, WE ACHIEVED VITED BASED ON THEIR RES ARE ELECTED IN ONE OF TIONAL TENNIS COMMUNISTON THE CAMPBELL'S HALL OF THE GALLERIES PROHOUT THE GALLERIES PROHOUT THE GALLERIES PROHOUT OF THE GALLERIES PROHOUT OF THE ORIGINAL ROOMS OF TAMILY ENSHRINEMENT GALL OF FAME	VORLDWIDE RECOGNITION AS CORDS OF COMPETITIVE ACHIEF THREE CATEGORIES RECEITY VOTE TO ELECT THESE IN FAME CHAMPIONSHIPS THE TECTURAL FIRM MCKIM, MEAIPLE OF SPORTING EXCELLENCASIS ON ITS CULTURAL IMPACUIDING PERSONAL INSIGHT IN THE NEWPORT CASINO, WHEF ALLERY HONORS THE GREATES	THE SPORT'S OFFICIAL HALL OF IEVEMENT, WITH ANCILLARY NT PLAYER, MASTER PLAYER, AND DIVIDUALS FOR INDUCTION THE MUSEUM, HOUSED IN THE D & WHITE AND DECLARED A EE THE EXHIBITS HIGHLIGHT THE CT THE STORIES OF OUR HALL OF THE HISTORICAL RE VISITORS OF ALL AGES CAN

Dart TV	Checklist o	f Deguired	Schadulae
	CHECKHSLU	ı Keuulleu	Scheuules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
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? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
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? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part I	14b	Yes	
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 U S ? If "Yes," complete Schedule F, Part II	15	Yes	
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 U S ? <i>If "Yes," complete Schedule F, Part III</i>	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21		N o
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		N o
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
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? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
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? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
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</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		N o
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2009)

art V	Statements Regarding Other IRS Filings and Tax Compliance	
-------	---	--

			Yes	No
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
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?	1c	Yes	
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			
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)	2b	Yes	
Ba	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
Ь	If "Yes," enter the name of the foreign country ►CJ, BD See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ia	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
		-		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.			
	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		
0	Section 501(c)(7) organizations. Enter			
	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			
.1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders]		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 120	j l		İ

194 BELLEVUE AVENUE NEWPORT, RI 02840 (401) 849-3990

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

Se	ction A. Governing Body and Management			
			Yes	No
1a L	Enter the number of voting members of the governing body 1a 62 Enter the number of voting members that are independent 59			
ь 2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			
2	other officer, director, trustee, or key employee?	2		Νo
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?	3		Νo
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νo
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		Νο
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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νo
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?	16b		
	ection C. Disclosure	_		_
17	List the States with which a copy of this Form 990 is required to be filed ► NY , RI , CA , FL , MD , MA , NJ , CT , OI	R,PA	, TN , V	Α
18	Section 6104 requires an organization to make its Form 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. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orga	nızatıor	n ⊫ -
	NANCY CARDOZA			

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

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

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

For	n 990 (2009)			Page 8
1b	Total	0		62,389
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►5			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> "Yes," complete Schedule J for such individual	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No
S	ection 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			
	(A) Name and business address (B) Description of services		(C Compe	
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 •0			
		F	orm 99	0 (2009)

Form 99								Page 9
Part V	<u> </u>	Statement o	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
#\$ st	1a	Federated camp	paigns 1a					
e Ta	ь	Membership du	es					
% B	c	Fundraising eve	ents 1c	572,762				
<u>≅,≅</u>	d		ations 1d					
ğΞ	e	Government grants						
ue Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no	butions included in	1,173,920				
0 E	h	Total. Add lines	1a-1f	▶	1,750,682			
				Business Code				
Program Serwce Revenue	2a	TENNIS TOURNAME	ENTS	900,099	1,538,707	1,538,707		
	ь	TENNIS COURT RE	VENUES	900,099	903,141	903,141		
- G	c	hall of fame admis	sion	900,099	560,338	560,338		
<u>₹</u>	d	OTHER EVENTS		900,099	225,225	225,225		
3	e	TOURNAMENT PRO	GRAM	541,800	70,990		70,990	
Š Š	f	All other progra	m service revenue					
ž	g	Total. Add lines	: 2a-2f		3,298,401			
	3	Investment inc	ome (including dividen	ds, interest				
		and other simila	aramounts)	▶ [667,965			667,965
	4		tment of tax-exempt bond	· · · ·				
	5	Royalties						
	6a	Gross Rents	(ı) Real 449,688	(II) Personal				
	ь	Less rental	278,746					
	_ c	expenses Rental income	170,942					
		or (loss)		<u> </u>	170,942			170,942
	d	Net rental incor	me or (loss) (ı) Securities	► (II) O ther	170,542			170,342
	7a	Gross amount from sales of assets other than inventory	2,680,020	(ii) o thei				
	b c	Less cost or other basis and sales expenses Gain or (loss)	1,837,943 842,077					
	d		s)	▶	842,077			842,077
	8a	Gross income fi						
Other Revenue		See Part IV , lin	.762 reported on line 1c) e 18	767,267				
듔	р С		penses b loss) from fundraising	626,722	140,545			140,545
-	9a		rom gamıng actıvıtıes		·			
	b c		penses b	vities				
	10a	Gross sales of returns and allo	• •	352,441				
	ь	Less cost of go	oods sold b	421,888				
	с	Net income or (loss) from sales of inve	entory	-69,447	-45,450	-23,997	
		Miscellaneous	s Revenue	Business Code				
	11a							
	ь							
	С							
	d	All other revenu						
	12	Total. Add lines	s 11a–11d See Instructions	· · · · •				
		. J. a. i evelluei .			6,801,165	3,181,961	46,993	1,821,529

	990 (2009)				Page 10
Par	Statement of Functional Expenses				
А	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D).	
Do no	ot include amounts reported on lines 6b, b, 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				· ·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	24,370	24,370		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	562,213	252,808	279,405	30,000
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	139,377	139,377		
7	Other salaries and wages	1,262,538	878,534	173,756	210,248
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	962	476	362	124
9	Other employee benefits	85,694	44,163	17,434	24,097
10	Payroll taxes	155,355	103,538	33,608	18,209
11	Fees for services (non-employees)				
а	Management				
ь	Legal	5,343	2,861	2,482	
С	Accounting	40,215		40,215	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	69,725			69,725
f	Investment management fees	75,000		75,000	
g	Other	93,992	59,462	32,009	2,521
12	Advertising and promotion	88,384	25,930	45,859	16,595
13	Office expenses	49,973	20,907	25,237	3,829
14	Information technology	11,119	10,326	793	
15	Royalties				
16	Occupancy	205,897	205,897		_
17	Travel	177,093	130,223	35,636	11,234
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	·			<u> </u>
19	Conferences, conventions, and meetings	3,750	3,392		358
20	Interest				
21	Payments to affiliates				_
22	Depreciation, depletion, and amortization	690,684	680,336	10,348	
23	Insurance	169,090	132,619	36,471	
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)				
а	Federal Taxes	1,000	1,000		
b	Tennis Prize Money/Fees	944,988	944,988		
c	other expenses	280,713	231,610	20,659	28,444
d	food & Facilities	173,621	164,342	9,128	151
е	repairs & maintenance	166,154	148,336	8,612	9,206
f	All other expenses	278,711	192,153	40,697	45,861
25	Total functional expenses. Add lines 1 through 24f	5,755,961	4,397,648	887,711	470,602
26	Joint costs. Check here ► ☐ 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				
				_	000 (2000)

Pa	rt X	Balance Sheet						
					(A) Beginning of year		(B) End of year	
	1	Cash—non-interest-bearing			1,887	1	2,624	
	2	Savings and temporary cash investments			709,660	2	2,634,944	
	3	Pledges and grants receivable, net			288,456	3	129,798	
	4	Accounts receivable, net			210,973	4	216,514	
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of	s, key	employees, and				
		Schedule L				5		
	6	Receivables from other disqualified persons (as defined under s persons described in section 4958(c)(3)(B) Complete Part II of		4958(f)(1)) and				
		Schedule L				6		
Assets	7	Notes and loans receivable, net				7		
SS	8	Inventories for sale or use	ntories for sale or use					
٧	9	Prepaid expenses and deferred charges	rges				59,862	
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	18,495,358				
	ь	Less accumulated depreciation	10b	9,149,687	8,908,749	10c	9,345,671	
	11	Investments—publicly traded securities		19,058,510	11	23,471,220		
	12	Investments—other securities See Part IV, line 11	3,469,108	12	2,630,360			
	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) .	32,898,829	16	38,601,360			
	17	Accounts payable and accrued expenses .	389,312	17	504,536			
	18	Grants payable		18				
	19	Deferred revenue			360,385	19	365,639	
	20	Tax-exempt bond liabilities				20		
<u> </u>	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.	•		21		
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
Lie		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 to unrelated third parties				24		
	25	Other liabilities Complete Part X of Schedule D				25		
	26	Total liabilities. Add lines 17 through 25			749,697	26	870,175	
Fund Balances		Organizations that follow SFAS 117, check here ▶	lete l	ines 27				
ank	27	Unrestricted net assets			13,456,290	27	16,310,411	
89	28	Temporarily restricted net assets			823,534	28	6,367,265	
р	29	Permanently restricted net assets		17,869,308	29	15,053,509		
표		Organizations that do not follow SFAS 117, check here ▶ ┌ ar	nd com	ıplet e				
- 		lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31		
	32	Retained earnings, endowment, accumulated income, or other fu	ınds			32		
Net	33	Total net assets or fund balances			32,149,132	33	37,731,185	
_	34	Total liabilities and net assets/fund balances	32,898,829	34	38,601,360			

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
3а	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?	3a		No
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	3b		

Form **990** (2009)

OMB No 1545-0047

Employer identification number

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization is a section 501(c)(3) organization or a section

Public Charity Status and Public Support

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ. See separate instructions.

Inspection

INTERNATIONAL TENNIS HALL OF FAME INCORPORATED Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h **b** Type II c Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No 11g(i) and (III) below, the governing body of the the supported organization? (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s) (iii) (iv) (vi) (v) Type of Is the Is the Did you notify the (i) organization organization in (vii) organization in Name of (ii) (described on organization in col (i) listed in A mount of col (i) of your col (ı) organized EIN lines 1-9 above supported your governing support? support? in the US? organization or IRC section document? (see Yes No Yes No Yes instructions))

Total

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	(Complete only if yo	ou checked the	box on line 5,	7, or 8 of Part I	i.)			
	ection A. Public Support	1		1				
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	009	(f) Total
	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,052,17	7 3,177,697	2,829,843	1,994,530	1	,750,682	11,804,929
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3	2,052,17	7 3,177,697	2,829,843	1,994,530	1	,750,682	11,804,929
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							4,243,966
6	Public Support. Subtract line 5							7.560.063
	from line 4							7,560,963
	ection B. Total Support							
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	09	(f) Total
7	A mounts from line 4	2,052,177	1,688,163	2,829,843	1,994,530	1,	750,682	11,804,929
8	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties and income from similar sources	1,439,136	1,688,163	3,197,635	1,681,084	1,	117,653	9,123,671
9	Net income from unrelated business activities, whether or not the business is regularly carried on	67,887	54,775	45,459	27,809		19,451	215,381
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets							
11	Total support (Add lines 7 through 10)							21,143,981
12	Gross receipts from related activiti	, ,	•			12	_	18,302,061
13	First Five Years If the Form 990 is check this box and stop here ection C. Computation of Pul			, third, fourth, or f	ifth tax year as a	501(c)(3) organiz	ration, ▶
14	Public Support Percentage for 200			11 column (f))		14		35 760 %
15	Public Support Percentage for 200	•				15		30 210 %
	33 1/3% support test—2009. If the	·	·	x on line 13 and l	line 14 is 33 1/3%		.check t	
b	and stop here. The organization qua 33 1/3% support test—2008. If the box and stop here. The organizatio 10%-facts-and-circumstances test is 10% or more, and if the organization mean organization	alifies as a public organization did n qualifies as a p — 2009. If the org tion meets the "	ly supported orga not check the bo ublicly supported anization did not facts and circums	nization x on line 13 or 16 organization check a box on lir tances" test, che	ia, and line 15 is 3 ne 13, 16a, or 16b ck this box and st	33 1/3% ond line	or more, 14 Explain	► ▽ check this ► ¯
b 18	10%-facts-and-circumstances test 15 is 10% or more, and if the organical Explain in Part IV how the organizal supported organization Private Foundation If the organizationstructions	nization meets th tion meets the "'	ie "facts and circu facts and circums	imstances" test, o tances" test The	check this box and organization qual	d stop he lifies as a	r e. publicly	,

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support			<u> </u>	1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
	business activities not included						
	ın lıne 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes been	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

efile GRAPHIC print - DO NOT PROCESS

As Filed Data

DLN: 93493319030470

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Employer identification number Name of the organization INTERNATIONAL TENNIS HALL OF FAME INCORPORATED 13-6144356 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 Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? 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 for any other purpose conferring impermissible private benefit 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) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat 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 Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 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, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 🕨 \$ ____ Does each conservation easement reported on line 2(d) above satisfy the requirements of section

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.

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

- 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

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

(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

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

Cat No 52283D

Schedule D (Form 990) 2009

ar	Til Organizations Maintaining Co	llections of Art	<u>, His</u>	torica	al Trea	asures, or	Othe	er Similar .	<u>Ass</u>	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne follo	wing tha	it are a signifi	cant (use of its coll	ectio	n	
а	Public exhibition		d	Γ I	oan or	exchange pro	grams	5			
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
1	Provide a description of the organization's co	ollections and expla	ın hov	w they 1	further t	he organizatio	on's e	xempt purpos	se in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,				mılar	Г	Yes	√ No
Pai	t IV Escrow and Custodial Arrang						ed "\	es" to Forn	n 990),	
	Part IV, line 9, or reported an an										
la	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	diary	for cor	ntributio	ons or other as	ssets	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng tab	le						
									A mo	unt	
с	Beginning balance						1c				
d	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1f				
la	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?						\sqcap	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV	/									
Pa	rt V Endowment Funds. Complete										
_	D	(a)Current Year 22,611,016	(E	Prior Y	ear 351,052	(c)Two Years Ba	ack (c	1)Three Years Ba	ack (e	e)Four Ye	ears Back
a	Beginning of year balance			34,3	9,725						
b	Contributions	84,667 5,961,095		10.0			+		-		
с	Investment earnings or losses	5,961,095		-10,6	382,943		_				
d	Grants or scholarships	F22 F16			266 010		_		-		
е	Other expenditures for facilities and programs	533,516		Č	366,818						
f	Administrative expenses										
g	End of year balance	28,123,262		22,6	511,016						
2	Provide the estimated percentage of the yea	r end balance held a	as								
а	Board designated or quasi-endowment	25 190 % %									
ь	Permanent endowment ► 53 390 % %										
	Term endowment > 21 420 % %	•									
c Ba	Are there endowment funds not in the posses	ssion of the organiz	ation 1	that are	e held a	nd administer	ed for	the			
_	organization by	ooton or the organiz								Yes	No
	(i) unrelated organizations							[3a(i)		Νo
	(ii) related organizations							📮	Ba(ii)	<u> </u>	Νο
	If "Yes" to 3a(II), are the related organizatio	•							3b		
	Describe in Part XIV the intended uses of th						- 10				
'aT	t VI Investments—Land, Buildings	s, and Equipme	<u>nt. 5</u>								
	Description of investment				ost or oth (investme			(c) Accumula depreciation		(d) Bo	ok value
.a	Land					1	06,304				106,30
b	Buildings					14,3	34,984	6,094	4,381		8,240,60
c	Leasehold improvements										
d	Equipment					3,4	70,973	2,75	2,660		718,313
е	Other					5	83,097	302	2,646		280,451

9,345,671

Part VII Investments—Other Securities. See F			d of valuation
(including name of security)	(b)Book value		-year market value
Financial derivatives Closely-held equity interests			
Other	F17.600		
VCFA PRIVATE EQUITY PARTNERS	517,680		С
RCP ADVISORS	496,790		С
GTAA FUNDS - GMO	750,000		С
GTAA FUNDS - AQR	750,000		С
adams street	115,890		С
Total. (Column (b) should equal Form 990, Part X, col (B) line 12	2,630,360	12	
Part VIII Investments—Program Related. See (a) Description of investment type	(b) Book value	(c) Metho	d of valuation
(a) Description of investment type	(b) Book Value	Cost or end-of	-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lin (a) Description			(b) Book value
Total. (Column (h) Should equal Form 990, Part X, col (B) line 19	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X			
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability			
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.	, , , , , , , ,	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.	•	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		

Par	t XII Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	<u>its</u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,801,16
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,755,96
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,045,204
4	Net unrealized gains (losses) on investments	4	4,536,849
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	4,536,849
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	5,582,05
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	12,770,960
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	5,969,79!
3	Subtract line 2e from line 1	3	6,801,16
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
Ь	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	(
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	6,801,16
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per I	
1	Total expenses and losses per audited financial statements	1	7,188,907
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	1,432,946
3	Subtract line 2e from line 1	3	5,755,96
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	(
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	5,755,96

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,

Ident if ier	Return Reference	Explanat ion
Part III, Line 1a		PURCHASES OF COLLECTION ITEMS ARE EXPENSED AND RECORDED ON THE STATEMENT OF ACTIVITIES AS DECREASES IN UNRESTRICTED NET ASSETS IN THE YEAR IN WHICH THE ITEMS ARE ACQUIRED CONTRIBUTED COLLECTION ITEMS ARE NOT CAPITALIZED AND, THEREFORE, ARE NOT REFLECTED IN THE FINANCIAL STATEMENTS
Part III, Line 4		THE INTERNATIONAL TENNIS HALL OF FAME MUSEUM'S PERMANENT COLLECTION CONSISTS OF OVER 16,000 OBJECTS RANGING FROM FINE ART, TROPHIES, PLAYER MEMORABILIA, TENNIS RACQUETS, EQUIPMENT AND OTHER EPHEMERA RELATED TO THE HISTORY OF THE SPORT, ITS CHAMPIONS, ENSHRINES, AND THE CULTURAL HISTORY OF THE NEWPORT CASINO THE LIBRARY AND ARCHIVES COLLECTION CONSISTS OF 5,000 BOOKS, 250,000 STILL IMAGES OF PLAYERS, INFORMATION RELATING TO THE ORIGINS OF THE GAME, THE NEWPORT CASINO AND OTHER TENNIS RELATED SUBJECTS, 4,000 AUDIO-VISUAL MATERIALS, AND AN ABUNDANCE OF PERIODICALS, SIGNIFICANT CORRESPONDENCE AND RECORDS THE EDUCATION COLLECTION CONSISTS OF OBJECTS AND EQUIPMENT USEFUL TO HANDS-ON STUDY OR OTHER PROGRAMS OF EDUCATION THE HALL OF FAME MAINTAINS A MUSEUM COLLECTION POLICY WHICH ADDRESSES COLLECTION UPKEEP AND ACCESSION/DEACCESSION PRACTICES THESE COLLECTIONS FURTHER THE ORGANIZATION'S EXEMPT PURPOSE BY THEIR USE TO HONOR THE HEROES AND HEROINES OF TENNIS THROUGH ENSHRINEMENT, TO OPERATE A MUSEUM, TO FOSTER AN APPRECIATION OF TENNIS HISTORY, TO PRESENT TENNIS-RELATED ACTIVITIES FOR THE ENJOYMENT OF THE PUBLIC, TO PROMOTE THE SPORT OF TENNIS AND FOSTER INTEREST IN TENNIS AMONG JUNIORS
Part V, Line 4	Description of Intended Use of Endowment Funds	the intended use of the organization's endowment funds is to provide income to underwrite operations
Part XII. Line 2d - Other	Description of Uncertain Tax Positions Under FIN 48	the hall of fame accounts for the effect of any uncertain tax positions based on a "more likely than not" threshold to the recognition of the tax positions being sustained based on the technical merits of the position under scrutiny by the applicable taxing authority if a tax position or positions are deemed to result in uncertainties of those positions, the unrecognized tax benefit is estimated based on a "cumulative probability assessment" that aggregates the estimated tax liability for all uncertain tax positions interest and penalties assessed, if any, are accrued as income tax expense the hall of fame has identified its tax status as a tax exempt entity as a tax position, however, the hall of fame has determined that such tax position does not result in an uncertainty requiring recognition the hall of fame is not currently under examination by any taxing jurisdiction its federal and state income tax returns are generally open for examination for the past three years
Part XII, Line 2d - Other Adjustments Part XIII, Line 2d - Other		rental expense 278746 special events expense 626722 cost of goods sold 421888 rental expense 278746 special events expense 626722
A djustments		cost of goods sold 421888

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493319030470

OMB No 1545-0047

2009

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Attach to Form 990. ▶ See separate instructions.

Inspection Employer identification number

INI	ERNATIONAL TENNIS	HALL OF FAME IN	CORPORATED			13-6144350	5	
Pa	art I General Info	rmation on Ac	tivities Outsi	ide the United States	s. Complete			swered
	"Yes" to Form	990, Part IV, lir	ne 14b.					
1				ecords to substantiate				
	· -		_	assistance, and the se				–
	the grants or assista	nce /					. F Y	es Γ No
2	For grant makers. Desc United States	rıbe ın Part IV the	organization's pi	ocedures for monitoring th	ne use of grar	nt funds outsıd	e the	
3	Activites per Region (Use Schedule F-1	(Form 990) ıf ad	ditional space is needed)				
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	ıs a progra describe sp	ty listed in (d) am service, ecific type of s) in region	(.) ocal c	expenditures
	T ASIA AND THE			GRANT TO RECIPIENT				24,370
_	IFIC			LOCATED IN REGION				
	tral america and the bbean			investments				
Tota	als ▶	0	0					24,370

Part I	V, line 15, for any	sistance to Organ y recipient who recom 990) if additional	eived more than \$5	es Outside the Un ,000. Check this box	nited States. Composite of the composite	plete if the organiza received more than	tion answered "Yes n \$5,000	" to Form 990, ► 厂
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EAST ASIA AND THE PACIFIC	building of tennis courts	24,370	CHECK			
2 Enter total tax-exemp	number of recipion t by the IRS, or f	ent organizations lis or which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50:	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . 🟲	0
3 Enter total	number of other	organizations or en	tities					1 E (Form 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

		in Part I, line 2, and any additional information.
Identifier	ReturnReference	Explanation
Procedure for Monitoring Grants Outside the U S		Schedule F, Part I, Line 2 THIS GRANT IS TO BUILD TENNIS COURTS AT PRINCE ROYAL COLLEGE, CHIANG MAI THAILAND HALL OF FAMER BUD COLLINS VISITS THE SCHOOL REGULARLY AND REPORTS BACK TO THE BOARD ON A REGULAR BASIS PHOTOS ARE TAKEN BY THE SCHOOL STAFF ON A REGULAR BASIS AND SENT TO THE ITHF'S DEVELOPMENT OFFICE
Method Used to Acccount for Expenditures		Schedule F, Part I, Line 3 THE ORGANIZATION USES THE ACCRUAL METHOD OF ACCOUNTING, AND THAT WAS THE METHOD USED TO ACCOUNT FOR THIS EXPENDITURE

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

Supplemental Information Regarding **Fundraising or Gaming Activities**

OMB No. 1545-0047 2009

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, Open to Public or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions. Inspection **Employer identification number** INTERNATIONAL TENNIS HALL OF FAME INCORPORATED 13-6144356

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part.

- Indicate whether the organization raised funds through any of the following activities. Check all that apply
- Solicitation of non-government grants Mail solicitations
- Solicitation of government grants Internet and e-mail solicitations
 - Phone solicitations Special fundraising events
- In-person solicitations
- Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities?
- **b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is

to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization	
		Yes	No				
HEMMING & GILMAN INC	LEGENDS BALL EVENT PLANNER		No	843,770	69,725	774,045	
Total		>	843,770	69,725	774,045		

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or 3 licensing

CA,CT,FL,MD,MA,NJ,NY,OR,PA,RI,TN,VA

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form	iplete if the organizati i 990-EZ, line 6a. List	on answered "Yes" to events with gross rece	Form 990, Part IV, lin eipts greater than \$5,	ie 18, or 000.	report	:ed
			(a) Event #1 LEGENDS BALL/AUCTION (event type)	(b) Event #2 TRIBUTE EVENT (event type)	(c) O ther Events 1 (total number)	(d) Tot (Add col co		
E E	1	Gross receipts	843,770	228,950	267,309		1,340	0,029
Revenue	2	Less Charitable contributions	420,87	3	151,889		57.	2,762
	3	Gross income (line 1 minus line 2)	422,897	7 228,950	115,420		767	7,267
	4	Cash prizes						
မှာ	5	Non-cash prizes						
Expenses	6	Rent/facility costs						
ă	7	Food and beverages						
Direct	8	Entertainment						
Δ	9	Other direct expenses .	363,710	143,758	119,254		626	6,722
	10	Direct expense summary Add lin	ies 4 through 9 in columr	n (d)			626	6,722
	11	Net income summary Combine li	nes 3, column d, and line	10			14(0,545
Par	t III	Gaming. Complete if the oil \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mor	e than)
Revenue			(a) Bıngo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot (Add col co	_	_
	1	Gross revenue						
မှာ ()	2	Cash prizes						
sesued	3	Non-cash prizes						
<u>ភ</u>	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor	Г Yes	│ Yes	┌ Yes%			
	7	Direct expense summary Add line	s 2 through 5 in column	(d)				
	8	Net gaming income summary Com	nbine lines 1, column d, a	nd line 7				
9 a b	Is th	er the state(s) in which the organiza he organization licensed to operate No," Explain				· 9a	Yes	No
10a b		e any of the organization's gaming 'es," Explain	licenses revoked, suspe	nded or terminated during	the tax year?	10a		
11		s the organization operate gaming	activities with nonmemb	ers?				
12	Is th	he organization a grantor, beneficia ned to administer charitable gaming	ry or trustee of a trust or	a member of a partnersh	ıp or other entity			
	. 57111		, • • • •	· · · · · · · · · · · · · · · · · · ·		12		i

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493319030470

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of	the c	organiz	at io	n				
NTERNAT	IONAL	TENNIS	HALL	OF	FAME	INCORI	PORATE	Ð

Employer identification number

13-6144356

Pa	rt I Questions Regarding Compensatio	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III		,			
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	\sqcap	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses desc			1b		
2	Did the organization require substantiation prior to i					
	officers, directors, trustees, and the CEO/Executive	Directo	or, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organizationganization's CEO/Executive Director Check all the					
	Compensation committee		Written employment contract			
	Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t?	4a		Νo
ь	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νο
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νο
	If "Yes" to any of lines $4a-c$, list the persons and pr	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	ust comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	lıne 1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of		, , , , , , , , , , , , , , , , , , , ,	7	Yes	
8	Were any amounts reported in Form 990, Part VII, ;					
	subject to the initial contract exception described in	n Regs	section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of (i) Base compensation	W-2 and/or 1099-MI (ii) Bonus & incentive	(iii) Other reportable	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or
		compensation	compensation	compensation				Form 990-EZ
Mark Stenning	(I) (II)	210,138 0	0	_	25,323 0	14,206 0	249,667 0	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Reference	
Part I, Line	The CEO's bonus payment was decided by the chairman of the board and approved by the full board the bonus payment is deferred and is included in column c of schedule j, part ii

Schedule J (Form 990) 2009

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b. ▶ Attach to Form 990 or Form 990-EZ. ▶See separate instructions.

OMB No 1545-0047 2009

DLN: 93493319030470

Open to Public Inspection

Name of the organization

INTERNATIONAL TENNIS HALL OF FAME INCORPORATED

Employer identification number

13-6144356

Approved

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) 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 (c) Corrected?

(a) Name of disqualified person 1

Yes No

(g)Written

agreement?

No

Yes

2	Enter	the amo	unt	of t	ахі	mpo	ose	d or	n the	e org	ganı	zatı	on r	nana	ager	s o	r dı	squ	alıfı	ed	pers	ons	dur	ıng	the	yea	ar ui	nder				
	sectio	n 4958																											\$			
3	Enter	the amo	unt	of t	ах,	ıfar	ny,	on I	ıne	2, a	bov	e, re	eımb	urs	ed b	y th	he c	orga	nıza	atio	n.							•	\$			
a i	rt II	Loan	s to	o a	nd,	/or	r F	ror	n I	nte	res	ste	d P	ers	ons	5.																
		Comp	lete	ıf th	ie o	rgai	nıza	atıoı	n an	swe	red	"Ye	s" c	n F	orm	990	0, P	art	I۷,	line	e 26	, or	For	m 9	90	-EZ	, Pa	rt V	line	38a		
								<i></i>							·													(f)				

Τо

(b) Loan to (e) In or from the (a) Name of interested person and (c)O riginal by board or (d)Balance due default?

organization? principal amount committee? From Yes Yes

Total **Grants or Assistance Benefitting Interested Persons.** Part III

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

(a) Name of interested person

purpose

(b)Relationship between interested person and the organization

(c) A mount of grant or type of assistance

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) Relationshipbetween interestedperson and the	(c) A mount of transaction	(d) Description of transaction	organiz	aring of ation's nues?
	organization			Yes	No
INSIDE OUT SPORTS	ENTITY MORE THAN 35% OWNED BY JAMES S COURIER, CURRENT DIRECTOR	69,803	PAYMENT FROM THE ORGANIZATION FOR TOUR FEES, PRIZE MONEY AND APPEARANCES MR COURIER WAS NOT INVOLVED IN THE CONTRACT NEGOTIATIONS		Νο
CHUBB INSURANCE	ENTITY OF WHICH ANDREW MCELWEE, CURRENT DIRECTOR, IS AN OFFICER	205,074	PAYMENT FROM THE ORGANIZATION FOR INSURANCE PRICING WAS BASED UPON FAIR MARKET VALUE MR MCELWEE WAS NOT INVOLVED IN THE HALL OF FAME'S PURCHASING DECISION AN INDEPENDENT INSURANCE AGENT DOES AN INDEPENDENT MARKET SURVEY EVERY YEAR		No
mary rompf	WIFE of william rompf, officer	139,377	employment		No

OMB No 1545-0047

13-6144356

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Internal Revenue Service **Employer identification number** Name of the organization INTERNATIONAL TENNIS HALL OF FAME INCORPORATED

Pa	ITTI Types of Property							
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d Method of d rever	letermı	nıng	
1	Art—Works of art	Х	22		Items not capitalize			
	Art—Historical treasures .		22	<u> </u>	Trems not capitalize	<u>= u</u>		
	Art—Fractional Interests							
	Books and publications	X		0	Items not capitaliz			
	Clothing and household			<u> </u>	rtems not capitanze	<u>- u</u>		
•	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	9	59,384	FMV on date receiv	e d		
.0	Securities—Closely held stock $$.							
.1	Securities—Partnership, LLC, or trust interests							
2	Securities—Miscellaneous							
.3	Qualified conservation contribution—Historic structures							
4	Qualified conservation contribution—Other							
.5	Real estate—Residential .							
6	Real estate—Commercial							
7	Real estate—Other							
8	Collectibles	Х	91	0	Items not capitalize	e d		
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
2	Historical artifacts							
3	Scientific specimens							
4	Archeological artifacts							
5	O ther ► ()							
6	O ther ► ()							
	O ther ►()							
8	O ther ▶ ()							
9	Number of Forms 8283 received for which the organization compl		- .		29			0
_							Yes	No
0a	During the year, did the organiza							
	must hold for at least three year			on, and which is not require	d to be used			
	for exempt purposes for the enti					30a		No
Ь	If "Yes," describe the arrangeme	ent in Part 1	I					
1	Does the organization have a gif	t acceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
2a	Does the organization hire or use contributions?	e third part	es or related organizations	to solicit, process, or sell i	non-cash	32a		Νo
Ь	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Ident if ier	Return Reference	Explanation
Method for Determining Number of Contributors	1 ' ' '	The organization is reporting the number of contributions, not the number of contributors, on Schedule M
Non Reporting of Revenue	, ,	CONTRIBUTED COLLECTION ITEMS ARE NOT CAPITALIZED AND, THEREFORE, ARE NOT REFLECTED IN THE FINANCIAL STATEMENTS

Schedule M (Form 990) 2009

SCHEDULE 0

Department of the Treasury
Internal Revenue Service

(Form 990)

Supplemental Information to Form 990

2009

OMB No 1545-0047

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Open to Public Inspection

Name of the organization
INTERNATIONAL TENNIS HALL OF FAME INCORPORATED

Employer identification number

13-6144356

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		A PDF FILE OF THE TAX RETURN WAS E-MAILED TO ALL BOARD MEMBERS, EXCEPT THREE MEMBERS WITHOUT E-MAILS IT WAS FAXED TO THE INDIVIDUALS WITHOUT E-MAILS
Form 990, Part VI, Section B, line 12c		OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE DUTY BOUND TO CONDUCT THEMSEVES IN THE BEST INTERESTS OF THE ITHF IT IS THE RESPONSIBILITY OF THE EXECUTIVE COMMITTEE TO PROCESS ANY VIOLATIONS OF THE CODE, TO RESOLVE VIOLATIONS AND TO PRESENT VIOLATIONS TO THE BOARD IF FURTHER RESOLUTION IS NEEDED FAILURE TO COMPLY WITH THE CODE MAY RESULT IN REMOVAL AS AN OFFICER OR DIRECTOR OR TERMINATION AS A KEY EMPLOYEE THE ITHF IS NOT TO BE USED TO OBTAIN A FINANCIAL BENEFIT FOR THE OFFICER, DIRECTOR OR KEY EMPLOYEE OR A RELATED ENTITY CONFLICTS OF INTEREST ARE TO BE DISCLOSED, THE PERSON CONFLICTED IS TO REFRAIN FROM INFLUENCING THE ITHF'S DECISION AND MAY BE EXCUSED FROM THE MEETING, THE MINUTES OF THE MEETING ARE TO REFLECT ANY CONFLICTS During the July board meeting, a copy of the conflict of interest statement is discussed and distributed to all board members attending the meeting. A compliance statement is distributed and the members are asked to sign the statement and turn it in at the end of the meeting. Conflict of interest statements are sent to all board members not attending the meeting, and they are asked to return the compliance statement to the Director of Administration
Form 990, Part VI, Section B, line 15		A search of comparable salaries is conducted by reviewing 990's of similar companies, using salary com and national surveys. THE CEO APPROVES ANY SALARY INCREASES, WITHIN THE TOTAL BUDGET, FOR STAFF MEMBERS AND THE CHAIRMAN OF THE BOARD RECOMMENDS SALARY ADJUSTMENTS FOR THE CEO & PRESIDENT, THE EXECUTIVE COMMITTEE REVIEWS AND APPROVES THE CHAIRMAN'S RECOMMENDATIONS
Form 990, Part VI, Section C, line 19		THE INTERNATIONAL TENNIS HALL OF FAME WILL CONSIDER REQUESTS FOR COPIES OF GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS UPON REQUEST
SCHEDULE G, LINE 2B (III)	FUNDRAISER CUSTODY OF CONTRIBUTIONS ARRANGEMENT	HEMMING & GILMAN RECEIVES THE RESERVATIONS AND PAYMENTS FOR THE LEGENDS BALL THEY FORWARD CHECKS AND CREDIT CARD NUMBERS TO ITHF ACCOUNTING IN NEWPORT ON A REGULAR BASIS THE CHECKS, MADE OUT TO THE ITHF, ARE DEPOSITED THE DAY THEY ARE RECEIVED IN ACCOUNTING CREDIT CARDS ARE CHARGED DAILY, BY ITHF ACCOUNTING

Additional Data

Software ID: Software Version:

EIN: 13-6144356

Name: INTERNATIONAL TENNIS HALL OF FAME

INCORPORATED

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 1,079,509 including grants of \$ 24,370) (Revenue \$

OTHER PROGRAM SERVICES EXPENSES ARE BUILDING EXPENSES AND DEPRECIATION FOR THE NEWPORT CASINO, HOME OF THE ITHF, DESIGNATED A NATIONAL HISTORIC LANDMARKS ARE NATIONALLY SIGNIFICANT HISTORIC PLACES DESIGNATED BY THE SECRETARY OF THE INTERIOR BECAUSE THEY POSSESS EXCEPTIONAL VALUE OR QUALITY IN ILLUSTRATING OR INTERPRETING THE HERITAGE OF THE UNITED STATES, FEWER THAN 2,500 HISTORIC PLACES BEAR THIS NATIONAL DISTINCTION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, an	d Independ	dent (ont	rac	tor	s				
(A) Name and Title	(B) Average hours per		ition (that a					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	we e k	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Jefferson Barnes Executive Committee	30	Х						0	0	0
Anders Brag director	30	Х						0	0	0
A llen Brill director	30	Х						0	0	0
Cindy Brinker Simmons director	30	Х						0	0	0
Gırard Brownlow dırector	30	Х						0	0	0
Earl Buchholz Jr director	30	Х						0	0	0
Robert Bunnen Jr director	30	Х						0	0	0
Ronald Burns Executive Committee	30	Х						0	0	0
Juan Carlos Cappello director	30	Х						0	0	0
Lısa Cashın Executive Committee	30	Х						0	0	0
Christopher Clouser Chairman	20 00	X		Х				0	0	0
Douglas Conant director	30	X						0	0	0
James Courier Executive Committee	30	X						0	0	0
Thomas Cundy director	30	X						0	0	0
Donald Dell Vice Chairman	30	X		Х				0	0	0
Robert Downey director	30	Χ						0	0	0
Carlos Fleming director	30	X						0	0	0
Ron Fowler dırector	30	Х						0	0	0
Victoria Frazer director	30	X						0	0	0
Lucy Garvin director	30	Х						0	0	0
Philip Geier Jr director	30	X						0	0	0
Barbara Georgescu Vice Chairman	30	X		Х				0	0	0
Phillip Gore director	30	X						0	0	0
James Harvie-Watt Executive Committee	30	X						0	0	0
Alan Hassenfeld dırector	30	Х						0	0	0

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
James Hauslein	30							0	0	0	
director Dianne Hayes Executive Committee	30	×						0	0	0	
Peter Hurley Executive Committee	30	Х						0	0	0	
Edward Hyman director	30	Х						0	0	0	
Thomas James director	30	Х						0	0	0	
Elizabeth Jeffett director	30	Х						0	0	0	
Kevin Kane Executive Committee	30	X						0	0	0	
Eaddo Kiernan director	30	X						0	0	0	
Kay Koplovitz Treasurer	30	X		X				0	0	0	
W Andrew Krusen dırector	30	X						0	0	0	
Ted Leonsis director	30	Χ						0	0	0	
Stephen Lessing director	30	Х						0	0	0	
Constantine Macricostas director	30	Χ						0	0	0	
Andrew McElwee director	30	X						0	0	0	
Patrick McEnroe director	30	X						0	0	0	
Bartlett McGuire director	30	Х						0	0	0	
Joseph McNay dırector	30	X						0	0	0	
Scott Mead director	30	X						0	0	0	
D Lacey Milligan director	30	X						0	0	0	
Allen Morgan dırector	30	X						0	0	0	
Jeanne Moutoussamy-Ashe director	30	X						0	0	0	
Greg Muth director	30	Х						0	0	0	
Peter Palandjian Executive Committee	30	Х						0	0	0	
Lois Pattison de Menil director	30	Х						0	0	0	
Richard Phelps Executive Committee	30	X						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees,									, ,		
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other compensation	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	from the organization and related organizations	
John Reese Executive Committee	30	Х						0	0	0	
Carol Sahlman dırector	30	X						0	0	0	
Mary Ann Saleskı dırector	30	Х						0	0	0	
Bruce Schilling director	30	X						0	0	0	
E Ramone Segree director	30	Х						0	0	0	
Lee Sessions Jr director	30	Х						0	0	0	
Pam Shriver director	30	Х						0	0	0	
Vınayak Sıngh dırector	30	Х						0	0	0	
Mark Stenning chief executive officer	60 00	Х		Х				210,138	0	39,529	
W Pıke Talbert dırector	30	Х						0	0	0	
Tony Trabert President	12 50	X		Х				60,000	0	0	
David Tyree director	30	Χ						0	0	0	
Jon Vegosen dırector	30	X						0	0	0	
Nancy von Auersperg Executive Committee	30	X						0	0	0	
Rosalınd Walter Executive Committee	30	Х						0	0	0	
Marion Weatherstone director	30	Х						0	0	0	
William Webb director	30	Х						0	0	0	
Sue Ann Weinberg director	30	Х						0	0	0	
David Westin director	30	X						0	0	0	
Peggy Woolard Secretary	30	Х		Х				0	0	0	
Francesco Ricci Bitti Executive Committee	30	Х						0	0	0	
Nancy C Cardoza V P & Director of Admin	40 00			X				125,396	0	6,254	
William Rompf VP & Director of Tennis	40 00			Х				104,474	0	16,422	
Mary Rompf Head Tennis Pro	40 00					Χ		139,279	0	98	
Mary Heath Director of Sales & Mark	40 00					X		115,064	0	86	

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
TENNIS TOURNAMENTS	900,099	1,538,707	1,538,707		
TENNIS COURT REVENUES	900,099	903,141	903,141		
hall of fame admission	900,099	560,338	560,338		
OTHER EVENTS	900,099	225,225	225,225		
TOURNAMENT PROGRAM	541,800	70,990		70,990	

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Federal Taxes	1,000	1,000		
Tennis Prize Money/Fees	944,988	944,988		
other expenses	280,713	231,610	20,659	28,444
food & Facilities	173,621	164,342	9,128	151
repairs & maintenance	166,154	148,336	8,612	9,206