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

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

OMB No 1545-0047

Open to Public

Dep	artment of mal Revent	the Treasury	The organization m	nav have to use a	copy of this ret	urn to satisf	າ ່v state rend	ortina reauir	ements	Inspe		
A			endar year, or tax year be	<del>-</del>	January 1		nd ending		nber 31	, 20 11	J. 1011	
В		applicable	C Name of organization Uni							r identification	number	
ñ.	Address		Doing Business As							23-7417933		
Ħ.	Name ch	-	Number and street (or P O		E Telephon							
Ħ.	Initial retu	-	1310 E 96th Street				10	0	317-577-5130			
Ħ.	Тегтіла		City or town, state or count	ry, and ZIP + 4				<u> </u>				
Ħ.	Amended		Indianapolis, IN 46240	,,				4	<b>G</b> Gross red	ceints \$		
Ħ		on pending		pal officer				M(n) le this s		or affiliates? Ye	a V Na	
	Application	on pending	Mark Saunders (same as	•				1		cluded? Tye	_	
_	Tay-even	npt status	<u> </u>		(insert no ) 4	947(a)(1) or	527	4		list (see instruct		
j	Website:		w.midwest.usta com	1301(0)( . / 1	(inscretio) [ 4.	347 (a)(1) 01		-	exemption	•	5003	
ĸ			Corporation Trust	Association Of	ther ▶	L Yea	r of formation		T	of legal domicile	ОН	
P	art I	Summ				1			1			
			escribe the organization	's mission or m	ost significant	activities:					<del>-</del>	
	'	-	de services for our memb		-			nities to p	av tennis.			
ဥ				<b></b>					-9			
'n												
Activities & Governance	2	Check th	is box ▶ ☐ if the organi	zation disconti	nued its opera	tions or dis	sposed of	more than	25% of r	ts net assets		
Ğ	1		of voting members of th						3		7	
တ်	1		of independent voting m						4		7	
ij	1		nber of individuals empl		-		•		5		27	
댫	1		mber of volunteers (estin	•			•		6		170	
⋖	1		elated business revenue						7a		0	
	1		lated business taxable ii						7b		0	
_					· · · · · · · · · · · · · · · · · · ·			Prior Ye		Current	Year	
•	8	Contribut	tions and grants (Part VI	III. line 1h)			🗀	4	,601,475		4,673,722	
Revenue			service revenue (Part V				_		,746,650		5,159,167	
ě	1	_	ent income (Part VIII, col						11,046		20,707	
ď	1		enue (Part VIII, column		•				68,920		(35,639)	
			enue-add lines 8 throug				ne 12)	9	,428,091		9,817,957	
	<del></del>		nd similar amounts paid						,776,515		1,789,596	
			paid to or for members	•	• • •		—		0		0	
s			other compensation, em			n (A), lines s	5–10)	2	,054,963		1,901,471	
Expenses			onal fundraising fees (Pa				· —		0		0	
ē			draising expenses (Part									
ũ	17	Other ex	penses (PartilXt columni	(A) Rines 1 ha	11d 9 1 –24e)			5	,362,807		6,149,059	
	18	Total exp	penses (Part IX) column penses. Add lines 13-17	(must equal Pa	art XI column	(A), line 25	) . —	9	,194,285		9,840,126	
	19	Revenue	less expenses. Subtrac	∵llπ <del>e 18 from l</del> i	ne 102		´ <del> </del> _	•	233,806		(22,169)	
P S	1		I UG	DEN. UT	P	•	Be	ginning of Cu		End of Y		
Net Assets or Fund Balances	20	Total ass	ets (Part X, line 16) .				🗀	1	,762,893		1,828,970	
t Ase	21		oilities (Part X, line 26) .						495,314		583,560	
şŞ	22	Net asse	ts or fund balances. Sub	otract line 21 fro	om line 20		🗀	1	,267,579		1,245,410	
Pa	art II	Signat	ture Block				•					
Un	der penal	ties of perju	y, I declare that I have examir	ned this return incli	uding accompany	ing schedules	and stateme	ents, and to th	ne best of m	y knowledge ar	nd belief, it is	
tru	e, correct	, and compo	lete Declaration of preparer (o	ner than officer) is	based on all inforr	nation of which	ch preparer h	as any knowl	edge			
			メナン・バ	A June					6-0	79-7:	2	
Sig	gn	Sign	ature of officer	( ) -			<u> </u>	Da	te			
He	re	V D	orian A D	NSON	Dir	0+	TIME	nce				
		Туре	or print name and title	1								
Pa	id	Print/Ty	pe preparer's name	Preparer's	s signature		Date		Check [	7 IF PTIN		
	epare:	۱ ا							self-emp			
	e Only		ame >	•		-		Firm	n's EIN ▶			
_ =		<b>,</b>	address >						ne no			
Ma	v the IR		s this return with the pre	eparer shown a	hove? (see ins	tructions)					es 🗆 No	

Form **990** (2011)

Part	•	
	Check if Schedule O contains a response to any question in this Part III	<u> U</u>
1	Briefly describe the organization's mission:	
	To promote tennis throughout the Midwest for the general population and our members.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	☐ Yes ☑ No
_	If "Yes," describe these new services on Schedule O.	
3		_Yes ☑No
4	If "Yes," describe these changes on Schedule O.	as measured by
•	Describe the organization's program service accomplishments for each of its three largest program services, expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$1,769,596 including grants of \$1,648,881 ) (Revenue \$	0)
	District Support - Funding to the Districts to fund their commitment to their members and youth in their area.	
		· · · · · · · · · · · · · · · · · · ·
		<b></b>
4b	(Code: ) (Expenses \$ 3,966,964 including grants of \$ 0 ) (Revenue \$	4.488.494 )
	TennisLink - to provide a platform for our organization members to provide services for our members.	
4c	(Code:) (Expenses \$1,074,996 including grants of \$99,129 ) (Revenue \$	526,089 )
	Tennis Programs - to promote and fund tennis programs.	
	Other and sugar converse (Decombe in Cohedute O.)	
4d	Other program services (Describe in Schedule O.) (Expenses \$ 1,743,677 including grants of \$ ) (Revenue \$ )	
	Total program service expenses   8 555 233	

Part	V Checklist of Required Schedules			
•			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		✓
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓	
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		<b> </b>
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,		1	
_	Part III	5	Ľ	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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			<b>√</b>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	9		<b>  •</b>
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	1	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	1	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	,	1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<del>                                     </del>	1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		t	Ė
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
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		<b>√</b>
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			,
20 a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	19 20a	<del>                                     </del>	1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		<del>                                     </del>

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓	
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	<b>√</b>	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	<b>✓</b>	
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 lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		<b>√</b>
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		1
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		1
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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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):		4.	
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	<b>✓</b>	✓
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI			1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		√ 7 99(	

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 30			
Ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	ļ		
•	reportable gaming (gambling) winnings to prize winners?	1c	✓_	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 27	<u> </u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	
32	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<u> </u>		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b 4a	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
40	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		1
b	If "Yes," enter the name of the foreign country: ▶	40		<u> </u>
-	See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	L		
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			_
	required to file Form 8282?	7c		<b>✓</b>
	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<b>✓</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		<b>√</b>
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<b>✓</b>
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h		<b>✓</b>
	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	-	1
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		_
а	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		7
10	Section 501(c)(7) organizations. Enter:			<u> </u>
а	Initiation fees and capital contributions included on Part VIII, line 12		١	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	i		
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
٠.	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
р	Abo approximation to Depart the Secretary Constitution of the Secr			
_	100			
C 14a		4.6-		
14a b	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<b>—</b>	✓
	1 165, That it med a rottli 120 to report these payments! If No, provide an explanation in Schedule O.	14b		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S.			
	Check if Schedule O contains a response to any question in this Part VI			
Secti	on A. Governing Body and Management	<u> </u>	<u> </u>	<u> </u>
	on a coordinate Body and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year   1a 7			
	If there are material differences in voting rights among members of the governing body, or	1		
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
ь	Enter the number of voting members included in line 1a, above, who are independent . 1b 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		1
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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>✓</b>
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓_
6	Did the organization have members or stockholders?	6	✓	<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	_		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a	<b>✓</b>	├
	stockholders, or persons other than the governing body?	7b	✓	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	
ь	Each committee with authority to act on behalf of the governing body?	8b	✓	<u> </u>
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		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co		_
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a	<b>✓</b>	├─
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	/	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	$\vdash$
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13	<b>✓</b>	
14	Did the organization have a written document retention and destruction policy?	14	✓	
15	Did the process for determining compensation of the following persons include a review 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	1	
b	Other officers or key employees of the organization	15b	✓	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	<u> </u>	1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	40:	<del>                                     </del>	<b>  </b>
Secti	on C. Disclosure	16b	Щ_	<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed ► Indiana			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	า 501(	c)(3)s	only)
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of	of inter	rest r	olicv
-	and financial statements available to the public during the tax year.		h	y,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	<del>)</del>	

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Page	ı

Form	990	(201	11

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.											
(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule	ox, office Individua	unies er and	s pe	Ition more rson	than of the both or/trust Highest compensated employee	an	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
	0)	itee	ustee			ensated					
(1) Stephen Butzlaff, President				<u>,                                    </u>				0			
(2) Jonnelle Smith, Vice President				,				0			
(3) Violet Clark, Vice President				v			-	0			
(4) Beverly Wentz, Secretary				~				0			
(5) Don Harris, Treasurer				,				0			
(6) Gary Alexander, Vice President				,				0			
(7) Doug Wenger, Delegate				,				0			
(8) Mark Saunders, Executive Director					,			175,815			
(9)											
(10)											
(11)						_					
(12)											
(13)											
(14)											

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A) Name and title	(B) Average hours per week	officer and a director/trus						(D)  Reportable compensation from	(E) Reportable compensation from	n from	(F Estim amou oth	ated nt of
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizati (W-2/1099-I	ons	compens from to organize and rel organize	sation the ation ated
(15)													
(16)		-											<del></del>
(17)				i									·
(18)													
(19)													
(20)													
(21)													
(22)		•											<del>,</del>
(23)													
(24)													
(25)													
1b	Sub-total			· ·	L	 	•	<u> </u>	175,815				
d	Total number of individuals (including but						above	e) w	175,815 ho received m		00,000	of	
3	Did the organization list any <b>former</b> of employee on line 1a? If "Yes," complete	ficer, direc							oloyee, or high				es No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of reg greater the	portal an \$1	ble ( 150,	con	npei )? /:	nsatio	n a	nd other comp	ensation fi	om the		
5	Did any person listed on line 1a receive of for services rendered to the organization	r accrue co	ompe	nsat	tion	fro	m any ule .I f	un ors	related organiz	ation or inc	 dividua		
Section	on B. Independent Contractors		<b>,</b>						,				
1	Complete this table for your five highest compensation from the organization. Repyear.												's tax
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compensati	on
							_					-	
			_										
2	Total number of independent contractor	rs (ıncludir	na bi	ıt n	ot I	limit	ed tr	) th	ose listed abo	ove) who			
-	received more than \$100,000 of compens								iodo natou abi	J. J. WIIO			

Part VIII		Statement of Revenue								
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514				
nts	1a	Federated campaigns 1a								
ara our	b	Membership dues 1b 1,042,712	1							
S, E	С	Fundraising events 1c	1							
를 를 ar	d	Related organizations 1d	]							
st.	е	Government grants (contributions) 1e	]							
rtior er S	f	All other contributions, gifts, grants,								
혈		and similar amounts not included above 1f 3,631,010	·							
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f. \$								
	<u>h</u>	Total. Add lines 1a–1f	4,673,722		<u>.</u>					
Program Service Revenue	0-	Business Code	-							
ě	2a b	Marketing  Jr Programs		39,234						
8	C		-	399,790 117,676						
ΘŽ	d	Adult Programs  Community Development		7,093		<del>                                     </del>				
Š	e	Tennist ink	+	4,488,494						
gra	f	All other program service revenue .	<del>                                     </del>	106,880	<del></del>					
P	g	<b>Total.</b> Add lines 2a–2f ▶	5,159,167	,,,,,,,,						
	3	Investment income (including dividends, interest,				<u>'</u>				
		and other similar amounts)	20,707			20,707				
	4	Income from investment of tax-exempt bond proceeds ▶								
	5	Royalties								
		(i) Real (ii) Personal	]		-					
	6a	Gross rents	]							
	b	Less: rental expenses	1							
	C	Rental income or (loss)								
	d   7a	Net rental income or (loss)	_			ļ				
	'a		<del>,</del>							
	Ь	assets other than inventory 172,944 255,000 Less. cost or other basis	4							
	~	and sales expenses 181,321 255,000								
	c	Gain or (loss) (8,377) 0	-1 1							
	d	Net gain or (loss)	(8,377)			(8,377)				
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c).								
ē		See Part IV, line 18 a								
₹	ь	Less: direct expenses b		_						
		Net income or (loss) from fundraising events .	<u> </u>							
i	9a	Gross income from gaming activities. See Part IV, line 19								
	b	Less: direct expenses b	1	1						
		Net income or (loss) from gaming activities ▶								
	10a	Gross sales of inventory, less returns and allowances a								
	b	Less: cost of goods sold b								
	С	Net income or (loss) from sales of inventory ▶								
	<u> </u>	Miscellaneous Revenue Business Code								
	11a	Unrealized gain/loss	(27,262)			(27,262)				
	Ь									
	C		ļ							
	d	All other revenue	422 225			ļ				
	12	Total. Add lines 11a–11d	(27,262)							
	1.2	Total Toveriue. See instructions	9,817,957		-	Form <b>990</b> (2011)				

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX						
	t include amounts reported on lines 6b, 7b, , 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 United States. See Part IV, line 21	1,813,104	1,813,104			
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	20,000	20,000			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16					
4 5	Benefits paid to or for members	175,815		175,815		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)					
7	Other salaries and wages	1,448,153	1,064,565	383,588		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	118,311	72,008	46,303		
9	Other employee benefits	318,985	224,209	94,776		
10	Payroll taxes	87,379	58,124	29,255		
11	Fees for services (non-employees):					
а	Management	1,317		1,317		
b	Legal	29,962		29,962		
С	Accounting	11,090		11,090		
d	Lobbying					
е	Professional fundraising services. See Part IV, line 17					
f	Investment management fees					
g	Other					
12	Advertising and promotion					
13	Office expenses	242,028	170,065	71,963		
14	Information technology	5,453		5,453		
15	Royalties			·		
16	Occupancy	205,084	118,641	86,443		
17	Travel	193,492	175,429	18,063		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials					
19	Conferences, conventions, and meetings .	335,608	171,620	163,988		
20	Interest					
21	Payments to affiliates					
22	Depreciation, depletion, and amortization .	37,990	22,840	15,150		
23	Insurance			-		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)					
а	TennisLink	3,966,964	3,966,964			
b	Membership Services	139,194	139,194		· · · - ·	
C	Direct Program Expense	652,787	652,787			
d	US Open	37,410	37,410			
е	All other expenses	37,410	37,410			
25	Total functional expenses. Add lines 1 through 24e	9,840,126	8,706,960	1,133,166		
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)	3,04U, 1Z0	6,706,360	1,133,100		

	art X	Balance Sneet			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	249,175	1	305,551
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
ts	4	Accounts receivable, net	100,914	4	217,420
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	204,857	9	130,540
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	ь	Less: accumulated depreciation 10b	90,106	10c	80,811
	11	Investments—publicly traded securities	1,117,301	11	1,094,119
	12	Investments—other securities. See Part IV, line 11	<u> </u>	12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	540	15	540
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,762,893	<del></del>	1,828,970
_	17	Accounts payable and accrued expenses	290,804		408,096
ŀ	18	Grants payable		18	
	19	Deferred revenue	199,593		164,651
	20	Tax-exempt bond liabilities	100,000	20	10.,001
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
w	22	Payables to current and former officers, directors, trustees, key			
Liabilities	22	employees, highest compensated employees, and disqualified persons.  Complete Part II of Schedule L		22	
<u>.</u>	00	Secured mortgages and notes payable to unrelated third parties		23	
_	23 24		· · · · ·	24	
	1	Unsecured notes and loans payable to unrelated third parties  Other liabilities (including federal income tax, payables to related third		24	
	25	parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	4,917	25	10,813
	26	Total liabilities. Add lines 17 through 25	495,314		583,560
— Sa	20	Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.	400,014	20	303,000
Š	27	Unrestricted net assets	1,242,057	27	1,245,410
<u>a</u>	28	Temporarily restricted net assets	25,552		1,243,410
ã	29	Permanently restricted net assets	23,332	29	<u> </u>
Net Assets or Fund Balances	29	Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.		29	
S O	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds.		32	
et	33	Total net assets or fund balances	1,267,579	-	1,245,410
Z	34	Total liabilities and net assets/fund balances	1,762,893		1,828,970
	. • •	Total national of the total of the balances	1,102,033	_ ~ _	1,020,370

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		9,81	7,957
2	Total expenses (must equal Part IX, column (A), line 25)	2		9,84	0,126
3	Revenue less expenses. Subtract line 2 from line 1	3		(22	2,169)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,26	7,579
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6		1,24	5,410
Part	·				
	Check if Schedule O contains a response to any question in this Part XII		· · · ·	· · ·	<u>,                                    </u>
				Yes	No
1	Accounting method used to prepare the Form 990:   Cash  Accrual  Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," exp	laın ır	ר ו		
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .				<b>/</b>
b	Were the organization's financial statements audited by an independent accountant?		<b>—</b>	<b>/</b>	-
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over of the audit, review, or compilation of its financial statements and selection of an independent account	•	1	/	
	·			<b>V</b>	
	If the organization changed either its oversight process or selection process during the tax year, exp. Schedule O.	nain ii	1		
_					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year issued on a separate basis, consolidated basis, or both:	were	3		
			ĺ		
3a	Separate basis Consolidated basis Both consolidated and separate basis  As a result of a federal award, was the organization required to undergo an audit or audits as set f	orth "	2		i
Ja	the Single Audit Act and OMB Circular A-133?		' За	1	1
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	an the			-
•	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au		3ь		
				n 990	(2011)
					(-2)

## SCHEDULE C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

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

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

OMB No 1545-0047

2011

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Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

• Se	ection 501(c)(3) organizations	that have NOT filed Form 5768 (electio	n under section 501	(h)): Complete Part II-B. Do r	not complete Part II-A.
If the c	organization answered "Yes	" to Form 990, Part IV, line 5 (Proxy 1	ax) or Form 990-E	Z, Part V, line 35c (Proxy Ta	ax), then
• Se	ection 501(c)(4), (5), or (6) orga	anizations Complete Part III			
Name	of organization			Employer ider	ntification number
United	d States Tennis Association	Midwest Section			23-7417933
Part	I-A Complete if the	e organization is exempt und	er section 501(	c) or is a section 527 (	organization.
1		the organization's direct and indire			
2	·			•	}
3					***************************************
Part	I-B Complete if the	e organization is exempt und	er section 501(	c)(3).	
1		excise tax incurred by the organiza	<del> </del>		
2		excise tax incurred by organization			
3		ed a section 4955 tax, did it file For			Yes No
4a	<u> </u>		•		Yes No
b	If "Yes," describe in Part				
		e organization is exempt und	er section 501(	c), except section 501	(c)(3).
1		ly expended by the filing organiz			· / · /
2		filing organization's funds contrib			
		vities			
3		expenditures. Add lines 1 and 2.			
		·			
4		n file Form 1120-POL for this year			Yes No
5		ses and employer identification nur			
•		ents. For each organization listed,			
		ontributions received that were pro-			
		fund or a political action committe			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(a) Amount of political
	(a) Name	(b) Address	(C) EIIV	filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization if
					none, enter -0-
/4\					"
(1)					
(0)					
(2)					
(0)					
(3)					
	<del></del>				
(4)					
<i></i>					-
(5)		<u> </u>			
	· .				
(6)		<b></b>			

Pai `	t II-A Complete if the organization section 501(h)).	ı is exempt	under section 5	01(c)(3) and file	d Form 5768 (ele	ction under	
A	Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's						
	name, address, EIN, expenses, and share of excess lobbying expenditures).						
В	Check 🕨 🗌 if the filing organization che	ecked box A	and "limited con	trol" provisions a	ıpply.		
	Limits on Lobb			_	(a) Filing	(b) Affiliated	
	(The term "expenditures" me	<u> </u>	organization's totals	group totals			
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)							
	Total lobbying expenditures to influence		<del> </del>				
	Total lobbying expenditures (add lines 1a	-					
	Other exempt purpose expenditures .						
	Total exempt purpose expenditures (add		•			<del> </del>	
1	Lobbying nontaxable amount. Enter t columns.	ne amount	from the following	g table in both			
	If the amount on line 1e, column (a) or (b) is:	The lobbyin	g nontaxable amoun	t is:			
	Not over \$500,000	20% of the a	amount on line 1e				
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	is 15% of the excess	over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	us 10% of the excess	over \$1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	us 5% of the excess o	ver \$1,500,000			
	Over \$17,000,000	\$1,000,000					
	Grassroots nontaxable amount (enter 25	•					
	h Subtract line 1g from line 1a If zero or less, enter -0						
į	Subtract line 1f from line 1c. If zero or les				(1) 5: 4700		
j	If there is an amount other than zero reporting section 4911 tax for this year?		•	•		☐ Yes ☐ No	
	4-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)						
	Lobbying	Expenditure	s During 4-Year A	veraging Period	,		
	Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	( <b>d)</b> 2011	(e) Total	
2	Lobbying nontaxable amount						
	Lobbying ceiling amount (150% of line 2a, column (e))						
	: Total lobbying expenditures						
(	Grassroots nontaxable amount						
	Grassroots ceiling amount (150% of line 2d, column (e))						
1	Grassroots lobbying expenditures						

f the lobbying  During the legislation reference a Voluntee b Paid state c Media and d Mailings e Publicatif Grants to	he year, did the filing organization attempt to influence foreign, national, state or local on, including any attempt to influence public opinion on a legislative matter or um, through the use of:  ers?	Yes	No	A		_
legislation referend a Voluntee b Paid state c Media ac d Mailings e Publicatif f Grants to	on, including any attempt to influence public opinion on a legislative matter or um, through the use of:  ers?				mount	τ
<ul><li>a Voluntee</li><li>b Paid state</li><li>c Media ac</li><li>d Mailings</li><li>e Publicate</li><li>f Grants to</li></ul>	ers?					
<ul><li>b Paid state</li><li>c Media ac</li><li>d Mailings</li><li>e Publicate</li><li>f Grants to</li></ul>	ff or management (include compensation in expenses reported on lines 1c through 1i)? dvertisements?	$\longrightarrow$		ĺ		
<ul><li>c Media ad</li><li>d Mailings</li><li>e Publicati</li><li>f Grants to</li></ul>	dvertisements?		$\dashv$	Į		
<ul><li>d Mailings</li><li>e Publicati</li><li>f Grants to</li></ul>	to members, legislators, or the public?		$\dashv$			_
e Publicati	F	-	$\rightarrow$			-
f Grants to	ions, or published or broadcast statements?		-			_
	o other organizations for lobbying purposes?					_
3	ontact with legislators, their staffs, government officials, or a legislative body?		$\neg$			_
h Rallies, o	demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<del></del>	$\dashv$			
i Other ac	· · · · · · · · · · · · · · · · · · ·	$\neg$	$\neg \neg$			_
	dd lines 1c through 1i		$\neg$			_
	activities in line 1 cause the organization to be not described in section 501(c)(3)?					_
	enter the amount of any tax incurred under section 4912	$\overline{}$	$\neg$			_
	enter the amount of any tax incurred by organization managers under section 4912 .		.			_
	ng organization incurred a section 4912 tax, did it file Form 4720 for this year?					_
art III-A	Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), c	r se	ction		_
	501(c)(6).				Yes	т
)	hatastalla all (000) annous de la company de				<del></del>	+
	bstantially all (90% or more) dues received nondeductible by members?			1	1	+
	organization make only in-house lobbying expenditures of \$2,000 or less?			3	1	+
	organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c)			<u> </u>	Ь	_
1 Dues, as	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR answered "Yes."  seessments and similar amounts from members	. [	1			-, -
	expenses for which the section 527(f) tax was paid).	0				
a Current				1		
u concin	year	.	2a			_
	year		2a 2b			
b Carryove c Total .	er from last year	. [	2b 2c			
<b>b</b> Carryove <b>c</b> Total .  3 Aggrega	er from last year		2b			_
<ul><li>b Carryove</li><li>c Total .</li><li>3 Aggrega</li><li>4 If notice</li></ul>	er from last year	the	2b 2c			
b Carryove c Total . 3 Aggrega 4 If notice excess of	ter from last year	the	2b 2c			_
b Carryove c Total . 3 Aggrega 4 If notice excess c and politi	ter from last year	the	2b 2c 3			

	m 990 or 990-EZ) 2011	Page 4
Part IV	Supplemental Information (continued)	
	•	
	······	
	······	

### SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

2011

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

OMB No 1545-0047

Name of the organization Employer identification number **United States Tennis Association Midwest Section** 23-7417933 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) . 2 Aggregate grants from (during year) . . 3 4 Aggregate value at end of year . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose 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 education) Preservation of an historically important land area Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements . . . . 2a 2b c 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, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ▶ 4 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? . . . . . . . . . . . . . . . . ☐ Yes ☐ No 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) R In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 . . . . . . . . .

Assets included in Form 990, Part X

Part	Organizations Maintaining	Collections of	Art, Hist	torical T	reasures	, or Ol	her Similar A	ssets (continued)
3	Using the organization's acquisition, collection items (check all that apply):		ther reco	ds, chec	k any of th	e follov	wing that are a	significant use of its
а	☐ Public exhibition		d	☐ Loan	or exchang	ge prog	rams	
b	☐ Scholarly research		е	Other				
C	☐ Preservation for future generation							
4	Provide a description of the organization XIV.	tion's collections	and expla	un how ti	ney further	the org	ganization's exe	empt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather							
Dowl	IV Escrow and Custodial Arra							
Part	line 9, or reported an amour				anization	answe	red res tor	-Omi 990, Part IV,
12	Is the organization an agent, trustee	custodian or oth	her interm	nediany fo	r contribut	ions o	r other assets	not
ıu	included on Form 990, Part X?							·
ь	If "Yes," explain the arrangement in P							103 - 110
-	ii 100, Oxplain the arrangement iii 1	art xiv and comp	1010 1110 10	nounig a	<b>AD</b> 10.			Amount
С	Beginning balance					10	:	
d	Additions during the year					10	<del>-  </del>	
e	Distributions during the year					16	,	
f	Ending balance					11	:	
2a	Did the organization include an amou					. —		. 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in P	art XIV.						_
Part	V Endowment Funds. Comp	lete if the organiz	zation ar	swered	"Yes" to F	Form 9	90, Part IV, lır	
		(a) Current year	(b) Pro	or year	(c) Two year	rs back	(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance		ļ					
b	Contributions							
С	Net investment earnings, gains, and							
	losses							
d	Grants or scholarships		ļ					
е	Other expenditures for facilities and							
_	programs		1					
f	Administrative expenses		ļ					
g	End of year balance		<u> </u>			**		
2	Provide the estimated percentage of	tne current year ei	na balanc	e (line 1g	, column (a	i)) neia	as:	
a	Board designated or quasi-endowme Permanent endowment ▶	oz	%					
b	Permanent endowment ►  Temporarily restricted endowment ►							
C	The percentages in lines 2a, 2b, and		nn%					
3a	Are there endowment funds not in th			zation tha	at are held	and ad	lministered for	the
-	organization by:	россионен ст						Yes No
	(i) unrelated organizations		_					. 3a(i)
	(ii) related organizations							. 3a(ii)
b	If "Yes" to 3a(ii), are the related organ							. 3b
4	Describe in Part XIV the intended use							
Part	VI Land, Buildings, and Equi	oment. See Forr	n 990, P	art X, lin	e 10.	-		
	Description of property	(a) Cost or o (investri		, , ,	r other basis ther)		Accumulated epreciation	(d) Book value
1a	Land							
b	Buildings							
C	Leasehold improvements							
d	Equipment				237,466		318,277	80,811
е	Other	•						
Total.	Add lines 1a through 1e. (Column (d) i	must equal Form 9	990, Part )	K, column	(B), line 10	O(c).)	▶	

Part VII	Investments - Other Securitie	es. See Form 990, Part X,	line 12.	. 490
(;	a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year m	
(1) Financia	I derivatives			
(2) Closely-	held equity interests			
(3) Other				
(A)	*			
(B)				
(C)	***************************************			
(D)	**			
(E)	······································			
(F)				
(G)	·			<u> </u>
(H)				
(I)				·
Total. (Column	(b) must equal Form 990, Part X, col (B) line 12.)	<b>&gt;</b>		
Part VIII	Investments - Program Relat	ed. See Form 990, Part X,	line 13.	<del></del>
	(a) Description of investment type	(b) Book value	(c) Method of val Cost or end-of-year m	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 13.) I			
Part IX	Other Assets. See Form 990,	Part X, line 15.		
		(a) Description		(b) Book value
	d bond interest			540
_(2)				
(3)				
_(4)				
_(5)				
(6)				
_(7)				
(8)				
(9)				
(10)	4)			
	mn (b) must equal Form 990, Part X,		<u> ▶</u>	
Part X	Other Liabilities. See Form 99			
1.	(a) Description of liability	(b) Book value	-	
	income taxes			
	tax withheld	10,813	-	
(3)			1	
(4)			1	
(5)			_	
(6)	<del></del>			
(7)			·	
(8)			1	
(9)				
(10)			1	
(11)			]	
	(b) must equal Form 990, Part X, col. (B) line 25)			
2. FIN 48 (A	SC 740) Footnote. In Part XIV, provide	de the text of the footnote to	the organization's financial staten	nents that reports the
organization	n's liability for uncertain tax positions	under FIN 48 (ASC 740).		

Schedu	le D (Form 990) 2011				Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to A	udited	Financial Staten	nents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	9,817,957
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	9,840,126
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior penod adjustments			7	
8	Other (Describe in Part XIV.)			8	
9	Total adjustments (net). Add lines 4 through 8			9	
10	Excess or (deficit) for the year per audited financial statements. Combine			10	(22,169)
Part				r Re	turn
1	Total revenue, gains, and other support per audited financial statements			1	<del></del>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a		1	
b	Donated services and use of facilities	2b		7	
С	Recoveries of prior year grants	2c		1	
d	Other (Describe in Part XIV.)	$\overline{}$	255,00	0	
е	Add lines <b>2a</b> through <b>2d</b>			20	255,000
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1			<del>                                     </del>
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	<del>-</del>		┨	
c	· · · · · · · · · · · · · · · · · · ·		<del></del>	40	2 0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line				
Part	XIII Reconciliation of Expenses per Audited Financial Staten			_	<del></del>
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			<u> </u>	<del> </del>
_ a	Donated services and use of facilities	2a		İ	
b	Prior year adjustments	2b		┪	
c	Other losses	2c		╡	
ď	Other (Describe in Part XIV.)		255.00	0	
e	Add lines 2a through 2d			20	255,000
3	Subtract line 2e from line 1			3	<del></del>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	i i			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b		┪	
c	Add lines <b>4a</b> and <b>4b</b>			40	<del>,</del>
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5	<del></del>
Part		,			0,010,120
Comp Part V any a	lete this part to provide the descriptions required for Part II, lines 3, 5, and , line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII dditional information	, lines 2d	d and 4b. Also cor	nplet	e this part to provide
	Line 2d - The amount included on line 2d is a pass through revenue of \$255,00				••••••
	ill Line 20 - The amount included on line 20 is a pass through revenue of \$255	,000 that	also has a cost of	<b>3</b> 233,	JUU.
	······				

Schedule D (For	m 990) 2011	Page 5
Part XIV	Supplemental Information (continued)	
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SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990.

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OMB No. 1545-0047

**%**□ (h) Purpose of grant or assistance Employer identification number ✓ Yes to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000 23-7417933 Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes' Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . . . . . . . . . . . . . (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance 1,813,104 (d) Amount of cash grant Part II can be duplicated if additional space is needed (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance United State Tennis Association Midwest Section (b) EIN (1) See Attached Schedule 1 (a) Name and address of organization or government Name of the organization Part Part II 6 8 ල € 6 3 9 Ε <u>®</u>

Schedule I (Form 990) (2011)

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

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

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

Cat. No. 50055P

Page 2

Schedule I (Form 990) (2011)

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance 20,000 (c) Amount of cash grant (b) Number of recipients 35 (a) Type of grant or assistance 1 Cash Grant Part III N က 4 Ŋ 9

Schedule I (Form 990) (2011)

## **SCHÈDULE J** (Form 990)

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

2011 Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

**United States Tennis Association** 

Part I Questions Regarding Compensation

Inspection **Employer identification number** 

23-7417933

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director. Explain in Part III.			
	☐ Compensation committee ☐ Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
_				
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:	L		
а	Receive a severance payment or change-of-control payment?	4a		<b>√</b>
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		✓
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		✓
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	]		<b> </b>
	compensation contingent on the revenues of:	<u> </u>		
a	The organization?	5a		<b>√</b>
þ	Any related organization?	5b		<b>✓</b>
_	If "Yes" to line 5a or 5b, describe in Part III.  For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
6	compensation contingent on the net earnings of:			
_	· · · · · · · · · · · · · · · · · · ·	<u> </u>		
a	The organization?	6a		<b>✓</b>
b	Any related organization?	6b		✓
7				
•	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		1
٥		⊢ <u>′</u>		-
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	。		1
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	8		<u> </u>
•	Regulations section 53.4958-6(c)?	9		

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

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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(B) Breakdown of V		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation			/=/ /-/	
<b>(A)</b> Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported as deferred in pnor Form 990
Mark Saunders	6	175,815						
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Schedule J (Form 990) 2011

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Part III Supplemental Information  Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II.  Also complete this part for any additional information.
Schedule J (Form 990) 2011

## SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

United States Tennis Association Midwest S	ection						23-7	74179	33		
Part I Excess Benefit Transactions Complete if the organization a	s (section	501(c)(3 "Yes" or	) and section 501(c)( n Form 990, Part IV,	4) organiz line 25a o	zations only). or 25b, or Foi	rm 99	0-EZ,	Part '	V, line	40b.	
1 (a) Name of disqualified person		•		(h) Doscar	tion of transacti					(c) Con	rected?
(a) Name of disqualified persor	1			(b) Descrip	otion of transacti	on				Yes	No
(1)											
(2)					•						
(3)											
(4)				-							
(5)											
(6)											
2 Enter the amount of tax imposed under section 4958		-	ion managers or dis		-	_	he ye	ar ▶ ¢			_
3 Enter the amount of tax, if any, on l								<b>▶</b> \$	<u> </u>		
2 Entor the amount of tax, it any, on t	o 2, ab	010, 10	bureed by the ergun	Lation				•	<b></b>		
Part II Loans to and/or From Intere Complete if the organization a			n Form 990, Part IV,	line 26, o	r Form 990-E	Z, Pa	ırt V, I	ine 38	Ва.		
(a) Name of interested person and purpose	1	to or from anization?	(c) Onginal principal amount	(d) B	alance due	(e) In (	default?	by bo	proved pard or nittee?		ntten ment?
	То	From				Yes	No	Yes	No	Yes	No
(1)				<u> </u>			i				
(2)		1		1							
(3)											
(4)									Ī		
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											
Total			▶ \$								
Part III Grants or Assistance Benefic Complete if the organization a				lıne 27.							
(a) Name of interested person	(b) R	elationship	between interested perso organization	n and the	(c) /	Amount	and ty	pe of a	ıssıstan	ce	
(1)											
(2)											
(3)											
(4)									_		
(5)											
(6)											
(7)											
(8)											
(9)											
(10)					1						

•	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	anng of zation's nues?
(4) F.	ilea Mente Duncall	Davidson of David		18/	Yes	No
<u> </u>	ika Wentz-Russell	Daughter of Board	59,316	Wages		1
(2)		of Director				<del> </del>
(3) (4)					_	<del> </del> -
( <del>5)</del>						<del>                                     </del>
<del>(6)</del>				-		
(7)						
(8)						
(9)						ļ
10)	Complemental later weeking			<u> </u>		<u> </u>
Part V	Supplemental Information Complete this part to provide	ı de additional information for re:	sponses to question	ns on Schedule I. (see instruction	ns).	
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- <i></i>					·	
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#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047
2011
Open to Public Inspection

Name of the organization **Employer identification number United States Tennis Association Midwest Section** 2-7417933 Part VI Section A. Governing Body and Mangement 6.Does the organization have members or stockholders - The USTA is a membership organization where its members select representatives to the Board of Directors. 7a. Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body -See #6. above. 7b. Are any decisions of the governing body subject to approval by members, stockholders, or other persons - Changes to the By Laws, standing orders, budget and the election of officers to the Board of Directors. Part VI Section B. Policies 11b. The 990 is reviewed by our Audit Committee. It is then made available to the governing body. 12c. The policy is signed on an annual basis by the Directors and Officers and reviewed by same. 15a & b. The Human Resource Committee reviews all salary with the Executive Director and makes adjustments accordingly. Part VI Section C. Disclosure 19. Documents are available on Share Point for our membership and volunteer base and is available to the public upon their request.

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization	Employer identification number
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23-7417933 USTA Midwest Section Supporting Schedule - 2011 Form 990 Schedule I - Part II

For Year Ended December 31, 2011

Part II Grants & Other Assistance to Governments and Organizarions

		RC	Amount of	Method of	
Districts	N	Section	Cash Grant	Valuation	Purpose of Grant or assistance
Central Indiana Tennis Association	35-1404837	501 c 4	192,208	Cost	Support the District in promoting tennis
Chicago District Tennis Association	36-6118287	501 c 4	221,714	Cost	Support the District in promoting tennis
Northeastern Michigan Tennis Association	38-2193890	501 c 4	20,758	Cost	Support the District in promoting tennis
Southeastern Michigan Tennis Association	38-2193892	501 c 4	238,309	Cost	Support the District in promoting tennis
Western Michigan Tennis Association	38-2246953	501 c 4	84,462	Cost	Support the District in promoting tennis
Northern Indiana Tennis Association	31-0926461	501 c 4	69,213	Cost	Support the District in promoting tennis
Middle Illinois Tennis Association	37-1028161	501 c 4	47,713	Cost	Support the District in promoting tennis
Northern Illinois Tennis Association	31-0926456	501 c 7	57,684	Cost	Support the District in promoting tennis
Ohio Valley Tennis Association	31-0926466	501 c 4	237,520	Cost	Support the District in promoting tennis
Northeastern Ohio Tennis Association	34-1301372	501 c 3	170,257	Cost	Support the District in promoting tennis
Northwestern Ohio Tennis Association	34-1564385	501 c 4	73,594	Cost	Support the District in promoting tennis
Southern Illinois Tennis Association	37-1031939	501 c 4	15,992	Cost	Support the District in promoting tennis
Wisconsin Tennis Association	39-6283503	501 c 4	215,846	Cost	Support the District in promoting tennis
Northern Michigan Tennis Association	38-2486776	501 c 4	25,199	Cost	Support the District in promoting tennis
Total			1,670,467		
Vanous Receipants			142,637		
Total			1,813,104		