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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

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
SOUTHERN TENNIS ASSOCIATION INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
5685 SPALDING DRIVE NE

City or town, state or country, and ZIP + 4
NORCROSS, GA 30092

D Employer identification number
58-1190935

E Telephone number
(770) 368-8200

G Gross receipts $ 10,798,562

F Name and address of principal officer
JOHN CALLEN
5685 SPALDING DRIVE NE
NORCROSS, GA 30092

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☐ 501(c)(3) ☑ 501(c) (4) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ WWW SOUTHERN USTA COM

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1968

M State of legal domicile GA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
TO PROMOTE AND DEVELOP THE GROWTH OF TENNIS

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	35
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	56
6	Total number of volunteers (estimate if necessary)	6	4,250
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	20,000
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-65,089

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	7,134,467	7,457,293
	9	Program service revenue (Part VIII, line 2g)	3,279,623	3,194,261
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	92,746	3,869
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-578,648	143,139
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,928,188	10,798,562
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,989,073	4,796,736
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,460,772	2,733,506
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,276,040	2,499,868
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	9,725,885	10,030,110
	19	Revenue less expenses Subtract line 18 from line 12	202,303	768,452

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	8,102,772	9,444,645
	21	Total liabilities (Part X, line 26)	908,079	1,116,004
	22	Net assets or fund balances Subtract line 21 from line 20	7,194,693	8,328,641

Part II Signature Block

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

Sign Here

****** | 2013-08-13
Signature of officer | Date

JOHN CALLEN EXECUTIVE DIRECTOR & COO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
TARA D WHITE				P00910505

Firm's name ▶ CARR RIGGS & INGRAMLLC | Firm's EIN ▶ 72-1396621

Firm's address ▶ 4360 CHAMBLEE DUNWOODY RD STE 420
ATLANTA, GA 30341 | Phone no (770) 457-6606

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

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III . . . . ☑

1 Briefly describe the organization's mission

TO PROMOTE THE DEVELOPMENT OF TENNIS AS A MEANS OF HEALTHFUL RECREATION AND PHYSICAL FITNESS, AS WELL AS, TO ESTABLISH AND MAINTAIN RULES OF FAIR PLAY AND HIGH STANDARDS OF SPORTSMANSHIP

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ **Yes** ☑ **No**

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

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

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses $ 7,624,906 including grants of $ 4,796,736) (Revenue $ 2,985,261)

DISTRIBUTIONS OF GRANTS AND ALLOCATIONS - COSTS TO HANDLE MAINTENANCE & RECORDS SUBMITTING OF DEPOSITS AND DISTRIBUTING FUNDS TO 9 STATES & COMMUNITY ASSOCIATIONS

4b (Code) (Expenses $ 628,067 including grants of $) (Revenue $ 80,289)

JUNIOR DEVELOPMENT PROGRAM - PLAN AND SUPERVISE ALL JR ACTIVITIES FOR 200,000 PLAYERS, INCLUDING STA BOYS & GIRLS TEAMS, ENTRY FEES & ENDORSEMENT PROCEDURES

4c (Code) (Expenses $ 710,683 including grants of $) (Revenue $ 231,850)

ADULT PROGRAM - SUPERVISION, CONDUCT OF SECTIONWIDE ADULT PROGRAM ACTIVITIES INCLUDING LEAGUE PLAY, SENIOR RECREATION, ADULT RANKING, & ADULT RECREATION

(Code) (Expenses $ 85,089 including grants of $) (Revenue $ 20,000)

ANNUAL YEARBOOK PROMOTING TENNIS BOTH INSIDE THE MEMBERSHIP AND EXTERNALLY TO THE PUBLIC, BY COMMUNICATING THE HEALTHFUL BENEFITS OF PLAYING TENNIS

4d Other program services (Describe in Schedule O)

(Expenses $ 85,089 including grants of $) (Revenue $ 20,000)

4e **Total program service expenses ▶** 9,048,745

Part IV **Checklist of Required Schedules**

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1		No
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	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, 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, Part III*	5		No
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		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		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
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		No
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		No
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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	Yes	
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		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
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		No
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		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 (see instructions)*	17		No
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		No
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
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV 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	Yes	
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		No
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	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 lines 24b through 24d and complete Schedule K. If "No," go to line 25*	24a		No
b	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, highest 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 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		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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
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? *If "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, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b	Yes	
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*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

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	55		
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	2a	56		
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 (see instructions)		2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .		3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		No
b	If "Yes," enter the name of the foreign country ▶ ____ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .		5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .		6a		No
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).**				
a	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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds 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		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	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.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O		13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .		14b		

Part VI **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.*

Check if Schedule O contains a response to any question in this Part VI . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . .	1a 35			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent . . .	1b 35			
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		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . .		4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		5		No
6	Did the organization have members or stockholders? . . .		6	Yes	
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? . . .		7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . .		7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	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		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates? . . .	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . .	11a	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . .	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done* . . .	12c	Yes	
13	Did the organization have a written whistleblower policy? . . .	13	Yes	
14	Did 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?			
a	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 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		No
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? . . .	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶GA

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 made these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
▶JOHN CALLEN - EXECUTIVE DIRECTOR & COO 5685 SPALDING DRIVE NORCROSS, GA (770) 368-8200

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

Check if Schedule O contains a response to any question in this Part VII . . . . ☐

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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

		(D)	(E)	(F)
1b	**Sub-Total** . . . . ▶			
c	**Total from continuation sheets to Part VII, Section A** . . . . ▶			
d	**Total (add lines 1b and 1c)** . . . . ▶	456,692	0	102,662

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶3

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "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 or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		No

Section B. Independent Contractors

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

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶0

Part VIII **Statement of Revenue**

Check if Schedule O contains a response to any question in this Part VIII . . . . ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	**1a** Federated campaigns	**1a**					
	b Membership dues	**1b**					
	c Fundraising events	**1c**					
	d Related organizations	**1d**					
	e Government grants (contributions)	**1e**					
	f All other contributions, gifts, grants, and similar amounts not included above	**1f**	7,457,293				
	g Noncash contributions included in lines 1a-1f $						
	h **Total.** Add lines 1a-1f ▶			7,457,293			
Program Service Revenue			Business Code				
	2a MEMBERSHIP DUES		900099	2,383,801	2,383,801		
	b SPONSORSHIPS		900099	478,321	478,321		
	c SECTIONAL LEAGUE CHAMPIOINSHIP FE		900099	231,850	231,850		
	d TOURNAMENT SANCTION FEES		900099	80,289	80,289		
	e YEARBOOK INCOME		541800	20,000		20,000	
	f All other program service revenue						
	g **Total.** Add lines 2a–2f ▶			3,194,261			
Other Revenue	**3** Investment income (including dividends, interest, and other similar amounts) ▶			3,869			3,869
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶						
		(i) Real	(ii) Personal				
	6a Gross rents						
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss) ▶						
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory						
	b Less cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss) ▶						
	8a Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18	**a**					
	b Less direct expenses	**b**					
	c Net income or (loss) from fundraising events ▶						
	9a Gross income from gaming activities See Part IV, line 19	**a**					
	b Less direct expenses	**b**					
	c Net income or (loss) from gaming activities ▶						
	10a Gross sales of inventory, less returns and allowances	**a**					
	b Less cost of goods sold	**b**					
	c Net income or (loss) from sales of inventory ▶						
	Miscellaneous Revenue		Business Code				
	11a ATLANTA TENNIS CHAMPIONSHIPS, LLC		711210	143,139	143,139		
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a–11d ▶			143,139			
	12 **Total revenue.** See Instructions ▶			10,798,562	3,317,400	20,000	3,869

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX . . . . ☐

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	4,796,736	4,796,736		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	240,829	163,764	77,065	
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	1,904,626	1,291,751	612,875	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	183,404	124,715	58,689	
9	Other employee benefits	246,826	167,841	78,985	
10	Payroll taxes	157,821	107,110	50,711	
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting	18,811	12,767	6,044	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	28,318	19,219	9,099	
14	Information technology	18,757	12,730	6,027	
15	Royalties . .				
16	Occupancy				
17	Travel	39,915	27,090	12,825	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	229,191	155,548	73,643	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	65,937	44,750	21,187	
23	Insurance	22,694	15,402	7,292	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	PROGRAM DEVELOPMENT	795,143	795,143		
b	SALES & MARKETING	449,350	449,350		
c	ADULT/SENIOR TENNIS PRO	443,926	443,926		
d	JUNIOR TENNIS PROGRAM	299,986	299,986		
e	All other expenses	87,840	120,917	-33,077	
25	**Total functional expenses.** Add lines 1 through 24e	10,030,110	9,048,745	981,365	0
26	**Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet**

Check if Schedule O contains a response to any question in this Part X . . . . ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	29,819	1	5,541
	2	Savings and temporary cash investments	546,529	2	1,090,762
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	331,130	4	511,245
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	3,569	9	2,414
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a: 1,700,758			
	b	Less accumulated depreciation — 10b: 482,785	1,259,339	10c	1,217,973
	11	Investments—publicly traded securities	3,881,628	11	4,390,263
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	2,050,758	15	2,226,447
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	8,102,772	16	9,444,645
Liabilities	17	Accounts payable and accrued expenses	346,580	17	356,084
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	561,499	25	759,920
	26	**Total liabilities.** Add lines 17 through 25	908,079	26	1,116,004
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	7,194,693	27	8,328,641
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	7,194,693	33	8,328,641
	34	Total liabilities and net assets/fund balances	8,102,772	34	9,444,645

Part XI Reconcilliation 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	10,798,562
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,030,110
3	Revenue less expenses Subtract line 2 from line 1	3	768,452
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,194,693
5	Net unrealized gains (losses) on investments	5	508,635
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-143,139
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	8,328,641

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . ☑

			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," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	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		

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SOUTHERN TENNIS ASSOCIATION INC

Employer identification number
58-1190935

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 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

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ______

4 Number of states where property subject to conservation easement is located ▶ ______

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ ______

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ______

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

(ii) Assets included in Form 990, Part X ▶ $ ______

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

b Assets included in Form 990, Part X ▶ $ ______

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

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

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

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

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

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

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

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

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

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		163,772		163,772
b Buildings		1,256,355	272,210	984,145
c Leasehold improvements				
d Equipment		280,631	210,575	70,056
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				1,217,973

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

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

(a) Description	(b) Book value
(1) INVESTMENT IN SUBSIDIARY-EVENT RIGHTS OWNED BY SUB	596,250
(2) DUE FROM SUBSIDIARY	870,277
(3) DEFERRED COMPENSATION PLAN	759,920
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	2,226,447

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

1 (a) Description of liability	(b) Book value
Federal income taxes	
DEFERRED COMPENSATION	759,920
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	759,920

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

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

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

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

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

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	MANAGEMENT DOES NOT BELIEVE THAT THE ASSOCIATION HAS ANY MATERIAL UNCERTAIN TAX POSITIONS AT DECEMBER 31, 2012 AND 2011, HOWEVER, THE ASSOCIATION'S FEDERAL AND STATE INCOME TAX RETURNS FOR THE YEARS ENDED DECEMBER 31, 2011, 2010, AND 2009 ARE STILL AVAILABLE FOR EXAMINATION BY RELEVANT TAXING AUTHORITIES

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SOUTHERN TENNIS ASSOCIATION INC

Employer identification number
58-1190935

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
(1) ALABAMA TENNIS ASSOCIATION 3300 HIGHLAND AVENUE SOUTH BIRMINGHAM,AL 35205	63-0761000	501(C)(4)	402,247		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
(2) ARKANSAS TENNIS ASSOCIATION 2024 ARKANSAS VALLEY DRIVE STE 302 LITTLE ROCK,AR 72212	23-7372183	501(C)(4)	206,081		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
(3) GEORGIA TENNIS ASSOCIATION 2849 PACES FERRY ROAD STE 624 ATLANTA,GA 30339	58-1309245	501(C)(4)	1,269,403		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
(4) KENTUCKY TENNIS ASSOCIATION 8900 GREENEWAY COMMONS PLACE 101 LOUISVILLE,KY 40220	61-0916485	501(C)(4)	250,964		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
(5) LOUISIANA TENNIS ASSOCIATION 9270 SIEGEN LANE STE 702 BATON ROUGE,LA 70810	72-0827537	501(C)(4)	394,527		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
(6) MISSISSIPPI TENNIS ASSOCIATION PO BOX 5388 JACKSON,MS 39296	63-0737693	501(C)(4)	343,842		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
(7) NORTH CAROLINA TENNIS ASSOCIATION 2709 HENRY STREET GREENSBORO,NC 27405	56-1121513	501(C)(4)	925,021		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
(8) SOUTH CAROLINA TENNIS ASSOCIATION 18 WOODCROSS DRIVE COLUMBIA,SC 29212	57-0665261	501(C)(4)	652,659		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
(9) TENNESSEE TENNIS ASSOCIATION 14817 LEBANON ROAD OLD HICKORY,TN 37138	62-0992696	501(C)(4)	351,992		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . ▶ 0

3 Enter total number of other organizations listed in the line 1 table . . . ▶ 9

Part III **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.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 ALLOCATIONS OF FUNDS ARE MADE BY SOUTHERN TENNIS ASSOCIATION TO ITS MEMBER INSTITUTIONS IN THE VARIOUS SOUTHEASTERN STATES BASED UPON MEMBERSHIP LEVELS EACH STATE'S MEMBER INSTITUTION REPORTS ITS FINANCIAL POSITION AND OPERATIONS TO SOUTHERN TENNIS ASSOCIATION

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 58-1190935
Name: SOUTHERN TENNIS ASSOCIATION INC

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALABAMA TENNIS ASSOCIATION3300 HIGHLAND AVENUE SOUTH BIRMINGHAM,AL 35205	63-0761000	501(C)(4)	402,247		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
ARKANSAS TENNIS ASSOCIATION2024 ARKANSAS VALLEY DRIVE STE 302 LITTLE ROCK,AR 72212	23-7372183	501(C)(4)	206,081		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
GEORGIA TENNIS ASSOCIATION2849 PACES FERRY ROAD STE 624 ATLANTA,GA 30339	58-1309245	501(C)(4)	1,269,403		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
KENTUCKY TENNIS ASSOCIATION8900 GREENEWAY COMMONS PLACE 101 LOUISVILLE,KY 40220	61-0916485	501(C)(4)	250,964		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
LOUISIANA TENNIS ASSOCIATION9270 SIEGEN LANE STE 702 BATON ROUGE,LA 70810	72-0827537	501(C)(4)	394,527		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
MISSISSIPPI TENNIS ASSOCIATIONPO BOX 5388 JACKSON,MS 39296	63-0737693	501(C)(4)	343,842		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
NORTH CAROLINA TENNIS ASSOCIATION2709 HENRY STREET GREENSBORO,NC 27405	56-1121513	501(C)(4)	925,021		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
SOUTH CAROLINA TENNIS ASSOCIATION18 WOODCROSS DRIVE COLUMBIA,SC 29212	57-0665261	501(C)(4)	652,659		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS
TENNESSEE TENNIS ASSOCIATION14817 LEBANON ROAD OLD HICKORY,TN 37138	62-0992696	501(C)(4)	351,992		CASH	N/A	GENERAL & ADMINISTRATIVE, MEMBERSHIP, COMMUNITY DEVELOPMENT, & OTHER ASSORTED GRANTS

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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.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SOUTHERN TENNIS ASSOCIATION INC

Employer identification number
58-1190935

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate 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 idemnification 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 in 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**	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☑ 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			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only 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 compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
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**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

For each individual whose compensation must be reported 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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)JOHN CALLEN EXECUTIVE DIRECTOR & COO	(i)	190,912	0	0	35,891	14,026	240,829	0
	(ii)	0	0	0	0	0	0	0
(2)ROBERT BRYANT DIRECTOR OF MARKETING	(i)	150,550	0	0	0	21,719	172,269	0
	(ii)	0	0	0	0	0	0	0

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

Identifier	Return Reference	Explanation

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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 to provide any additional information.
► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SOUTHERN TENNIS ASSOCIATION INC

Employer identification number
58-1190935

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 4	ARTICLE IV VOTING RIGHTS OF THE MEMBERSHIP 1 VOTING RIGHTS FOR REPRESENTATION OF THE MEMBERSHIP SHALL BE VESTED SOLELY IN THE STATE ASSOCIATIONS, EXCEPT AS PROVIDED IN ARTICLE VII, SECTION 8 THESE RIGHTS INCLUDE ELECTION OF ALL MEMBERS OF THE BOARD OF DIRECTORS, INCLUDING OFFICERS, THREE DIRECTORS-AT-LARGE, ELECTION OF A SECTION DELEGATE WHO SHALL BE A MEMBER OF THE BOARD OF DIRECTORS, ELECTION OF MEMBERS FOR THE NOMINATING COMMITTEE, ADOPTION AND AMENDMENT OF BYLAWS, REPRESENTING THE MEMBERSHIP ON ISSUES OF SANCTIONS DESCRIBED IN ARTICLE II, SECTION 2, AND REPRESENTATION OF OTHER ISSUES WHICH ARE SUBJECT TO APPROVAL BY THE MEMBERSHIP ARTICLE VI MEETINGS OF MEMBERS 1 THE USTA SOUTHERN ANNUAL MEETING SHALL BE HELD ON A DATE BETWEEN THE FIRST DAY OF NOVEMBER AND THE LAST DAY OF FEBRUARY FOR THE TRANSACTION OF SUCH BUSINESS AS WILL COME BEFORE IT THE ODD YEAR ANNUAL MEETING SHALL TAKE PLACE BETWEEN THE FIRST DAY OF NOVEMBER OF THE EVEN YEAR AND THE LAST DAY OF FEBRUARY OF THE ODD YEAR THE DATE, PLACE AND TIME SHALL BE DETERMINED BY THE BOARD OF DIRECTORS ARTICLE VII BOARD OF DIRECTORS THE MANAGEMENT OF USTA SOUTHERN SHALL BE VESTED IN THE BOARD OF DIRECTORS THE BOARD OF DIRECTORS SHALL BE COMPOSED OF ELEVEN MEMBERS THE PRESIDENT, THE EXECUTIVE VICE-PRESIDENT, THREE VICE-PRESIDENTS, SECRETARY, TREASURER, A SECTION DELEGATE TO THE USTA, AND THREE DIRECTORS-AT-LARGE. ALL MEMBERS OF THE BOARD OF DIRECTORS MUST RESIDE WITHIN THE GEOGRAPHICAL BOUNDARIES OF USTA SOUTHERN, SHALL BE MEMBERS OF USTA, AND SHALL SERVE WITHOUT COMPENSATION 1A THE PRESIDENT SHALL BE THE CHIEF EXECUTIVE OFFICER THE PRESIDENT SHALL PRESIDE AT ALL MEETINGS OF THE MEMBERS, THE BOARD OF DIRECTORS, AND THE EXECUTIVE COUNCIL THE PRESIDENT SHALL APPOINT ALL COMMITTEE CHAIRMEN AND COMMITTEE MEMBERS WHOSE APPOINTMENTS ARE NOT OTHERWISE PROVIDED FOR IN THESE BYLAWS THE PRESIDENT MAY ALSO APPOINT TWO NON-VOTING MEMBERS OF THE EXECUTIVE COUNCIL THE PRESIDENT SHALL SERVE AS AN EX-OFFICIO MEMBER OF EACH COMMITTEE EXCEPT THE NOMINATING COMMITTEE. 4 THE BOARD OF DIRECTORS SHALL MEET NOT LESS THAN TWICE A YEAR TO REPORT ON AND DISCUSS MATTERS AND ESTABLISH POLICIES OF USTA SOUTHERN MEETINGS OF THE BOARD OF DIRECTORS SHALL BE HELD AT SUCH TIME AND PLACE AS MAY BE FIXED BY THE PRESIDENT ONE HALF OF THE MEMBERS OF THE BOARD OF DIRECTORS SHALL HAVE THE POWER TO CALL A MEETING DURING ALL MEETINGS OF THE BOARD OF DIRECTORS, EACH MEMBER OF THE BOARD SHALL HAVE ONE VOTE. 5 NOTICE OF THE TIME, PLACE, AND PURPOSE OF ALL BOARD OF DIRECTORS MEETINGS SHALL BE GIVEN TO EACH MEMBER NOT LESS THAN THREE DAYS BEFORE A MEETING NOTICE MAY BE GIVEN BY ELECTRONIC MEANS, FIRST-CLASS MAIL, OR FAX, TO EACH MEMBER, PROVIDED THAT ANY MEMBER WHO REQUESTS NOTICE BY FIRST-CLASS MAIL SHALL BE GIVEN NOTICE BY THIS METHOD 6 A QUORUM FOR TRANSACTION OF BUSINESS BY THE BOARD OF DIRECTORS SHALL BE NOT LESS THAN EIGHT OF ITS MEMBERS THE ACT OF A MAJORITY OF THE MEMBERS PARTICIPATING IN OR PRESENT AT THE MEETING AT WHICH THERE IS A QUORUM SHALL CONSTITUTE THE ACTION OF THE BOARD OF DIRECTORS 7 THE BOARD OF DIRECTORS SHALL SUBMIT A BUDGET TO THE EXECUTIVE COUNCIL FOR APPROVAL 10 AT ANY MEETING OF THE BOARD OF DIRECTORS, ANY MEMBER OF THE BOARD OF DIRECTORS OR MEMBER OF THE NOMINATING COMMITTEE MAY BE REMOVED FROM OFFICE FOR CAUSE BY A VOTE OF TWO-THIRDS OF THE BOARD OF DIRECTORS ARTICLE VIII EXECUTIVE COUNCIL 1 THE EXECUTIVE COUNCIL SHALL BE COMPOSED OF ALL MEMBERS OF THE BOARD OF DIRECTORS, NINE STATE DELEGATES, PAST SOUTHERN SECTION PRESIDENTS RESIDING WITHIN THE GEOGRAPHICAL BOUNDARIES OF USTA SOUTHERN, AND UP TO TWO NON-VOTING PRESIDENTIAL APPOINTEES 2 EACH STATE DELEGATE SHALL BE NAMED BY EACH STATE ASSOCIATION EACH STATE DELEGATE SHALL RESIDE WITHIN THE GEOGRAPHICAL BOUNDARIES OF THE STATE ASSOCIATION WHICH THE STATE DELEGATE REPRESENTS AS A MEMBER OF THE EXECUTIVE COUNCIL, EACH STATE DELEGATE SHALL ACT AS A REPRESENTATIVE OF THE DELEGATE'S RESPECTIVE STATE ASSOCIATION AND AS A REPRESENTATIVE OF USTA SOUTHERN THE STATE DELEGATE SHALL REPORT ON USTA AND USTA SOUTHERN ACTIVITIES AND OPPORTUNITIES TO THE DELEGATE'S RESPECTIVE STATE ASSOCIATION A VACANCY FOR ANY CAUSE SHALL BE FILLED BY THE STATE ASSOCIATION, AND THE STATE DELEGATE SO APPOINTED SHALL PRESENT TO THE USTA SOUTHERN SECRETARY THE STATE DELEGATE'S CERTIFICATE OF AUTHORITY FOR THE UNEXPIRED TERM IN THE EVENT ANY STATE ASSOCIATION FAILS TO NAME A STATE DELEGATE OR FAILS TO PROVIDE CERTIFICATION, THE STATE PRESIDENT SHALL BE THE STATE DELEGATE. STATE DELEGATES SHALL NOT SERVE ON THE EXECUTIVE COUNCIL IN MORE THAN ONE POSITION 3 THE EXECUTIVE COUNCIL SHALL MEET NOT LESS THAN TWICE A YEAR, AT WHICH MEETINGS CURRENT MATTERS INVOLVING USTA SOUTHERN ARE TO BE REPORTED ON, DISCUSSED, AND RECOMMENDATIONS WITH RESPECT TO POLICIES MAY BE MADE TO THE BOARD OF DIRECTORS THE EXECUTIVE COUNCIL SHALL HAVE AUTHORITY TO ALTER, AMEND, REPEAL, AND ADOPT NEW REGULATIONS IN ACCORDANCE WITH ARTICLE 14, SECTION 6 THE EXECUTIVE COUNCIL SHALL HAVE FINAL AUTHORITY TO APPROVE THE ANNUAL BUDGET OF THE ASSOCIATION 4 NOTICE OF THE TIME AND PLACE OF EXECUTIVE COUNCIL MEETINGS SHALL BE GIVEN TO EACH MEMBER NOT LESS THAN 30 DAYS BEFORE A MEETING NOTICE MAY BE GIVEN BY ELECTRONIC MEANS, FIRST-CLASS MAIL, OR FAX TO EACH MEMBER, PROVIDED THAT ANY MEMBER WHO REQUESTS NOTICE BY FIRST-CLASS MAIL SHALL BE GIVEN NOTICE BY THIS METHOD 5 DURING ALL MEETINGS OF THE EXECUTIVE COUNCIL, EACH MEMBER OF THE EXECUTIVE COUNCIL SHALL HAVE ONE VOTE WITH THE EXCEPTION THAT NO PRESIDENTIAL APPOINTEES SHALL HAVE A VOTE, AND THE VOTING STRENGTH OF THE PAST PRESIDENTS SHALL NOT EXCEED THE LOWER NUMBER OF PAST PRESIDENTS PRESENT OR THREE. IF, AT ANY MEETING, MORE THAN THREE PAST PRESIDENTS ARE PRESENT, THE THREE VOTES SHALL BE PRORATED AMONG THOSE PRESENT IF A PAST PRESIDENT IS ELECTED TO SOME OTHER OFFICE THAT COULD CAUSE THE PAST PRESIDENT TO FILL A SECOND POSITION ON THE EXECUTIVE COUNCIL, THEN THE PAST PRESIDENT'S VOTE ON THE EXECUTIVE COUNCIL WILL NOT BE INCLUDED IN THE VOTING STRENGTH OF THE PAST PRESIDENTS 6 A QUORUM FOR THE TRANSACTION OF BUSINESS BY THE EXECUTIVE COUNCIL SHALL BE NOT LESS THAN ONE-HALF OF ITS MEMBERS, EXCLUSIVE OF PAST PRESIDENTS AND PRESIDENTIAL APPOINTEES A MAJORITY OF THE VOTES CAST BY MEMBERS PARTICIPATING IN OR PRESENT AT THE MEETING SHALL CONSTITUTE THE ACTION OF THE EXECUTIVE COUNCIL 7 SPECIAL MEETINGS MAY BE CALLED BY THE EXECUTIVE COUNCIL AT ANY TIME AND PLACE UPON THE WRITTEN REQUEST OF ONE HALF OF THE MEMBERS OF THE EXECUTIVE COUNCIL SUCH REQUESTS SHALL STATE THE PURPOSE OF THE PROPOSED MEETING, AND ONLY THOSE MATTERS SPECIFIED IN THE REQUEST MAY BE ACTED UPON AT THE SPECIAL MEETING 8 AT ANY MEETING OF THE EXECUTIVE COUNCIL, ANY MEMBER OF THE EXECUTIVE COUNCIL MAY BE REMOVED FOR CAUSE BY A VOTE OF TWO-THIRDS OF THE EXECUTIVE COUNCIL
	FORM 990, PART VI, SECTION A, LINE 6	THERE ARE INDIVIDUAL, FAMILY, AND ORGANIZATIONAL MEMBERS, AS WELL AS, STATE ASSOCIATION MEMBERS REPRESENTING THE VARIOUS STATES IN THE SOUTHEASTERN PART OF THE UNITED STATES
	FORM 990, PART VI, SECTION A, LINE 7A	STATE ASSOCIATION MEMBERS HAVE THE POWER TO ELECT MEMBERS OF THE GOVERNING BODY
	FORM 990, PART VI, SECTION A, LINE 7B	BOARD DECISIONS CONCERNING CHANGES TO BYLAWS OR OTHER IMPORTANT ITEMS ARE VOTED ON BY STATE MEMBERS
	FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS PROVIDED TO THE AUDIT AND EXECUTIVE COMMITTEES PRIOR TO FILING FOR THEIR REVIEW AND APPROVAL
	FORM 990, PART VI, SECTION B, LINE 12C	THOSE CHARGED WITH GOVERNANCE ARE REQUIRED TO REPORT ANNUALLY ANY INTERESTS THAT COULD GIVE RISE TO A CONFLICT OF INTEREST
	FORM 990, PART VI, SECTION B, LINE 15	HUMAN RESOURCES COMMITTEE MAKES RECOMMENDATION TO THE EXECUTIVE COMMITTEE. SURVEYS ARE ANNUALLY SENT TO KEY STAFF AND EXECUTIVE COMMITTEE FOR PERFORMANCE APPRAISAL OF EXECUTIVE DIRECTOR FOR EMPLOYEES, THE EXECUTIVE DIRECTOR MAKES RECOMMENDATIONS THROUGH THE HUMAN RESOURCES COMMITTEE AND BUDGET PROCESS WITHIN THE APPROVED BUDGET, EXECUTIVE DIRECTOR DECIDES INDIVDUAL STAFF COMPENSATION
	FORM 990, PART VI, SECTION C, LINE 18	THE ORGANIZATION'S FORM 990 IS AVAILABLE UPON REQUEST
	FORM 990, PART VI, SECTION C, LINE 19	BY-LAWS, RULES, AND REGULATIONS, ALONG WITH GRIEVANCE PROCEDURES, ARE AVAILABLE ON THE ORGANIZATION'S WEB SITE.
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	ATLANTA TENNIS CHAMPIONSHIP K-1 -143,139
		THERE HAS NOT BEEN A CHANGE TO THE AUDIT COMMITTEE REVIEW PROCESS FROM THE PRIOR YEAR

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SOUTHERN TENNIS ASSOCIATION INC

Employer identification number
58-1190935

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1) UNITED STATES TENNIS ASSOCIATION 70 WEST RED OAK LANE WHITE PLAINS, NY 10604 13-5459420	TO PROMOTE AND DEVELOP THE GROWTH OF TENNIS	NY	501(C)(6)		N/A		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1) ATLANTA TENNIS CHAMPIONSHIPS LLC 5685 SPALDING DRIVE NORCROSS, GA 30092 27-1809891	HOST OF ATP TOUR TENNIS CHAMPIONSHIP	GA	SOUTHERN TENNIS ASSOCIATION INC	RELATED	143,139	829,868		No		Yes		75 000 %

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity? Yes	(i) No

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

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

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

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

(a) Name of other organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1) UNITED STATES TENNIS ASSOCIATION	C	7,457,293	ACTUAL AMOUNT

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

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

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

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 58-1190935
Name: SOUTHERN TENNIS ASSOCIATION INC

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Additional Data

Software ID:
Software Version:
EIN: 58-1190935
Name: SOUTHERN TENNIS ASSOCIATION INC

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL MCNULTY III PRESIDENT	1 00	X		X				0	0	0
BUD SPENCER EXECUTIVE VICE PRESIDENT	1 00	X		X				0	0	0
PAULA HALE VICE PRESIDENT	1 00	X		X				0	0	0
RANDY JACKSON VICE PRESIDENT	1 00	X		X				0	0	0
DEREK WHITE VICE PRESIDENT	1 00	X		X				0	0	0
JOHN LILES TREASURER	1 00	X		X				0	0	0
ANDY ANDREWS SECRETARY	1 00	X		X				0	0	0
REX MAYNARD USTA DELEGATE	1 00	X						0	0	0
PAT GUERRY DELEGATE-AT-LARGE	1 00	X						0	0	0
ELEANORA MAURITSON DELEGATE-AT-LARGE	1 00	X						0	0	0
BONNIE VANDEGRIFT DELEGATE-AT-LARGE	1 00	X						0	0	0
JOHN HERRING STATE PRESIDENT	1 00	X						0	0	0
AL MARSHALL STATE PRESIDENT	1 00	X						0	0	0
DREW MEYERS STATE PRESIDENT	1 00	X						0	0	0
DENNIS MILLER STATE PRESIDENT	1 00	X						0	0	0
JOE MURPHY STATE PRESIDENT	1 00	X						0	0	0
ALEX RUCKER STATE PRESIDENT	1 00	X						0	0	0
HELEN SMITH STATE PRESIDENT	1 00	X						0	0	0
RANDY STEPHENS STATE PRESIDENT	1 00	X						0	0	0
STEVE SUMMERS STATE PRESIDENT	1 00	X						0	0	0
HA TED BAILEY JR PAST PRESIDENT	1 00	X						0	0	0
BARBARA BREWER PAST PRESIDENT	1 00	X						0	0	0
STEVE DUFFEL PAST PRESIDENT	1 00	X						0	0	0
HERMAN ENOCHS JR PAST PRESIDENT	1 00	X						0	0	0
LUCY GARVIN PAST PRESIDENT	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
JEFF GRAY PAST PRESIDENT	1 00	X						0	0	0
M MARSHALL HAPPER III PAST PRESIDENT	1 00	X						0	0	0
JUDI MILLER PAST PRESIDENT	1 00	X						0	0	0
JACK MILLS PAST PRESIDENT	1 00	X						0	0	0
BERNARD NEAL PAST PRESIDENT	1 00	X						0	0	0
JIM RUSSELL PAST PRESIDENT	1 00	X						0	0	0
GORDON SMITH PAST PRESIDENT	1 00	X						0	0	0
MILDRED SOUTHERN PAST PRESIDENT	1 00	X						0	0	0
JUDY UTLEY PAST PRESIDENT	1 00	X						0	0	0
DON VARGA PAST PRESIDENT	1 00	X						0	0	0
CHERI GROSVENOR LEGAL COUNSEL	1 00	X						0	0	0
JOHN CALLEN EXECUTIVE DIRECTOR & COO	40 00			X				190,912	0	49,917
ROBERT BRYANT DIRECTOR OF MARKETING	40 00					X		150,550	0	21,719
WILLIAM OZAKI DIRECTOR OF PLAYER DEVELOPMENT	40 00					X		115,230	0	31,026