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

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service

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

▶ Do not enter Social Security numbers on this form as it may be made public.

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

A	For the 2	2013 calendar year, or tax year beginning , 2013, and e	ending		_	, 20							
В	Check if a				D Employ	er identification number							
	Address c				23-7417933								
	Name cha		om/suite		E Telepho	ne number							
$\overline{\Box}$	Initial retu		100	·									
$\overline{\Box}$	Terminate		100	<del>-</del>		317-003-0471							
$\overline{\Box}$	Amended			<b>G</b> Gross re	eceipts \$ 11,130,812								
$\overline{\Box}$		in pending F Name and address of principal officer		_		subordinates? Yes No							
_	тфриодио	Mark Saunders (same as C above)				s included? Yes No							
$\overline{}$	Tax-exem					I list (see instructions)							
<u>:</u>	Website:			H(c) Group									
K		ganization				<del></del>							
P	art I	Summary	Omation	1895	W State	of legal domicile OH							
_	_	Briefly describe the organization's mission or most significant activities:											
0		· · · · · · · · · · · · · · · · · · ·											
Governance	<u>-</u> '	To provide services for our members and the general population by providing opportunities to play tennis.											
Ĕ	2 6	Check this box ▶☐ if the organization discontinued its operations or dispos	and of m	oro than	25% of	ito not consta							
Š		Number of voting members of the governing body (Part VI, line 1a)	sea oi ii	iore man	1 1	its het assets.							
9	1	Number of independent voting members of the governing body (Part VI, line			3	6							
es 2		Total number of individuals employed in calendar year 2013 (Part V, line 2a)	•		5	6							
Ϋ́	1				6	27							
Activities &		Total number of volunteers (estimate if necessary)			7a	170							
		Net unrelated business taxable income from Form 990 7, 166 84 (5)			7a 7b	0							
_	0	Net unrelated business taxable income from Form 93091, also bar (5)	<del>· · ·</del>	Prior Yea		Current Year							
Revenue	8 (	Contributions and grants (Part VIII, line 1h).											
				,794,530	4,861,853								
		Program service revenue (Part VIII, line 29)	•	5,	,585,300	5,774,407							
æ		investment moonie (i art vin, ocianii pyrajes s, 4, and raj		23,964	41,843								
		Other revenue (Part VIII, column (A), line 3, od 8c 96 tttc. and 11e)		97,402	182,7 <u>09</u>								
_	+	Total revenue—add lines 8 through 11 (must equal) Rait VIII, column (A), line 12	2)		,501,196	10,860,812							
		Grants and similar amounts paid (Part IX,\column (A), lines 1-3)	• —	1	,839,028	1,969,199							
	1	Benefits paid to or for members (Part IX, column (A), line 4)	∴		0	0							
Ses	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10	"	2,	,425,799	2,456,655							
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	·		0	0							
X		Total fundraising expenses (Part IX, column (D), line 25)											
_	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	·		<u>,083,013</u>	6,269,437							
	1	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	·	10,	347,840	10,695,291							
		Revenue less expenses. Subtract line 18 from line 12			153,356	165,521							
is or	6	T. (1) (1) (1) (1) (1)	Begii	nning of Cur		End of Year							
Net Assets	20	Total assets (Part X, line 16)	·		,092,664	2,2230,656							
ž į	21	Total liabilities (Part X, line 26)	·		693,797	666,267							
		Net assets or fund balances. Subtract line 21 from line 20	<u> </u>	1,	<u>,398,867</u>	1,564,389							
_	art II	Signature Block											
Ur tru	ider penalt ie. correct.	ies of perjury, I declare that I have examined this return, including accompanying schedules and and complete beginning accompanying schedules and and complete beginning accompanying schedules and and complete beginning accompanying schedules.	statement enarer has	ts, and to th	e best of r	ny knowledge and belief, it is							
_	т.				- Ca	10 2011							
Sig	-n	Signature of officer	_	 Dat	<del>8 - 1</del>	13-20/7							
He	- ,		$\boldsymbol{\sigma}$	_		121 /40							
110		Type or print name and title	<u> </u>		AMC	e/fomin/ak							
		Print/Type preparer's name  Preparer's signature	Data		т	IDTIN							
Pa			Date		Check [								
	eparer	1			self-emp	ployed							
Us	se Only Firm's name					Firm's EIN ►							
N4-	w the ID	Firm's address >		Phor	ne no								
_		S discuss this return with the preparer shown above? (see instructions)	· · ·	<u> </u>	<u>· · · · · · · · · · · · · · · · · · · </u>	· · LYes L No							
Fo	r Paperw	ork Reduction Act Notice, see the separate instructions.	Cat No 11	1282Y		Form <b>990</b> (2013)							

Form 99		Page 2							
Part									
<u> </u>	Check if Schedule O contains a response or note to any line in this Part III	<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?	No							
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program								
	services?	l 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 measi								
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to o	thers,							
	the total expenses, and revenue, if any, for each program service reported.								
40	(Code) \(\( \( \)								
4a	(Code: ) (Expenses \$ 1,953,599 including grants of \$ 1,784,329 ) (Revenue \$ )  District Support Funding to the Districts to support their commitment to their members and youth in their area.								
	•••••••••••••••••••••••••••••••••••••••								
4b	(Code: ) (Expenses \$ 4,084,605 including grants of \$ ) (Revenue \$ )								
	TennisLink - to provide a platform for our organization members to provide services for our members.								
4c	(Code: ) (Expenses \$ 2,524,744 including grants of \$ ) (Revenue \$ )								
	Tennis Program and fund programs								
	· · · · · · · · · · · · · · · · · · ·								
	······································								
4d	Other program services (Describe in Schedule O.)								
	(Expenses \$ 427,813 including grants of \$ ) (Revenue \$ )  Total program service expenses \$ 8990.751	_							

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Part	IV Checklist of Required Schedules			Page 3
٠,	le the experience described in posting 501/a)/0) or 40.47/a)/1/ (athorities a small for data a)/0.45/40/41		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		<b>/</b>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		1
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	✓	
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		<b>✓</b>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," complete Schedule D, Part II	7	-	/
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		1
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		1
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		
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.	10		•
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		,
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
С	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
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e	✓	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	✓	
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		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, 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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? 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	-	<b>√</b>
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		<u> </u>
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		,
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Forn	n <b>990</b>	(2013)

Part	V Checklist of Required Schedules (continued)			
•			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 of grants or 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	1	
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 25a	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	_	1
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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	<b>√</b>	<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	30		<b>√</b>
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		<b>✓</b>
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, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b	_	<b>✓</b>
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? <i>If "Yes," complete Schedule R</i> ,		_	
38	Part VI	37	<b>/</b>	1
		<del></del>		

Form **990** (2013)

Part				
_ <u>`</u>	Check if Schedule O contains a response or note to any line in this Part V	<del>- · ·</del>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   57		105	NO
b	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			
	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 30			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	_
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		_
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		<b>✓</b>
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.			
E.	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			_
5a b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		<b>/</b>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		<b>-</b>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	- JC		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			<u> </u>
	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			
	and services provided to the payor?	7a		1
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		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year	<u> </u>		
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? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f		<b>√</b>
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		<b>∀</b>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	<del>  '''</del>		_
	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.			
а	Did the organization make any taxable distributions under section 4966?	9a		<b>\</b>
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	,		
_ b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		,	
11 a	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
_	against amounts due or received from them.)			
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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
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			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
D	If "Yes." has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14h		1

Part				
•	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See in:	struct	ions.
Section	Check if Schedule O contains a response or note to any line in this Part VI			. ☑
0001	on 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   6	$\overline{}$	103	NO
14	Enter the number of voting members of the governing body at the end of the tax year	┨		
	if the governing body delegated broad authority to an executive committee or similar		1	
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
	any other officer, director, trustee, or key employee?	2		7
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	ļ	✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5_		<b>/</b>
6	Did the organization have members or stockholders?	6	1	
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?	l _		
<b>L</b>	one or more members of the governing body?	7a	✓_	
b	stockholders, or persons other than the governing body?	76	✓	1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	7b		<del> </del>
•	the year by the following:	ļ		
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		<u> </u>	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	✓	
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?		١,	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		<del>                                     </del>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	1	<del>  -</del>
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	_	<del> </del>
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	1	
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		ļ
b	Other officers or key employees of the organization	15b	✓	
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		
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	1.56	<u> </u>	<del>  •</del>
	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		1
	on C. Disclosure			
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	า 501(	c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.			
19	Own website Another's website Upon request Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	Au1		
19	financial statements available to the public during the tax year.	erest	bolic	y, and
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the		
-	organization: ► Dorian A Dyson, Director of Finance, 1310 E 96th Street, Suite 100, Indianapolis, In 46240 317-669-04		•	

Form	aan	(2013)	
OHIL	990	120131	

.. ... ..

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- 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 no	r any relate	d orga I	anız		n co	ompe	nsa	ited any currer	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E)  Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Jonnelle Smith, President	10	1		/				0	o	
(2) Violet Clark, Executive Vice President	10	1		1				O	0	
(3) Don Harris, Vice President/Acting Treasurer	10	1		1				0	0	
(4) Mark Schuering, Vice President	10	1		1				0	0	
(5) Joy Albi, Secretary	10	1		1				0		
(6) Steve Butzlaff, Past President	10	1		1				0	0	
(7) Mark Saunders, Executive Director	40				1			186,115		
(8) Dorian A Dyson	40					<b>\</b>		108,600		
(9) Diane Ansay	40					1		100,950		
(10)			-		_			100,000		
(11)	<del> </del>									
(12)							_			
(13)		-					-			
(14)										

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	yees	(	C)	lighes	st C	ompensated E	mployees (d	continu	ied)		
	(A) Name and title		box,	unles	eck s pe	rson	than on the street that the st	an	(D) Reportable compensation	(E) Reportable compensation from		Estir	(F) mated unt of	
		week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatio (W-2/1099-M		compe fror orgar and i	ther ensation in the nization related izations	ì
(15)								_	-					
(16)				-										
(17)														
(18)						_						<u>-</u>		
(19)														
(20)			ļ											
(21)											+			
(22)								_						
(23)											$\dashv$			
(24)						_					_			
(25)														
1b	Sub-total		<u>.</u>		<u></u>		<u> </u>	<b>&gt;</b>	395,665		0			0
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)							<b>▶</b>	395,665	_	0			0
2	Total number of individuals (including but reportable compensation from the organi	t not limited						e) w		ore than \$1	00,000	) of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc						emp	ployee, or high	est compe	nsated		Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual											•	· •	
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or inc	lıvıdua 			
Section	on B. Independent Contractors								·					
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	lress							(B) Description of s	ervices		(C) Compens	ation	
								-						
					-									
								_						
2	Total number of independent contractor received more than \$100,000 of compensations.							o th	nose listed ab	ove) who		<u> </u>		

Feir	VIII	Charlest Onbardula O				D4.VIII		_
		Check if Schedule O	contains a resp	oonse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns	s 1a					
ăr our	b	Membership dues .	1b	978,316				
s, C Am	С	Fundraising events .	1c	•				
ar E	d	Related organizations	s 1d					
JS, (imi	е	Government grants (con	, <u> </u>					
dio er S	f	All other contributions, g						
章		and similar amounts not inc		3,883,537				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions include						1
	h	Total. Add lines 1a-1	<u>f</u>	Business Code	4,861,853			
Ž	0-	Bankatina		Business Code				<u> </u>
Je ve	2a   b	Marketing Junior Program				32,749		
es		Adult Program				652,442 135,874		·
eΖi	ď	Tonnist ink				4,891,982		<del> </del>
E	e					4,091,902		
Program Service Revenue	f	All other program ser				61,360		
Pro	g	Total. Add lines 2a-2	:f	•	5,774,407			1
	3	Investment income						
		and other similar amo	•		41,843			41,843
	4	Income from investmen	•					<u> </u>
	5	Royalties	(i) Real	(ii) Personal				
	6a	Gross rents	(ly Fical	(ii) i craonar				İ
	b	Gross rents Less: rental expenses						!
	C	Rental income or (loss)						!
	d	Net rental income or		▶				<del> </del>
	7a	Gross amount from sales of	(i) Secunties	(ii) Other				
		assets other than inventory	0	270,000				
	b	Less: cost or other basis						
		and sales expenses .	0	270,000				j
	С	Gain or (loss)	0					
	d	Net gain or (loss)		<u></u> . ▶	0			0
Other Revenue	8a	Gross income from fuevents (not including \$ of contributions reports See Part IV, line 18	ed on line 1c).					
ţ	Ь	Less: direct expenses	-					!
0		Net income or (loss) f			\ <del>-</del>			1
		Gross income from ga						
		See Part IV, line 19 .	a					
		Less: direct expenses						
		Net income or (loss) f		vities ►				
	10a	Gross sales of in returns and allowance	es a					
	b	Less: cost of goods s			<b></b>			<u> </u>
	_ <u>c</u>	Net income or (loss) t						<del>                                     </del>
	11-	Miscellaneous F		Business Code				<del> </del> -
	11a b	Unrealized Gain/Loss			182,709		·	182,709
	C				<del>                                     </del>			
	d	All other revenue .		-		_		<del></del>
	е	Total. Add lines 11a-	-11d		182,709			
	12	Total revenue. See i	nstructions	<b>&gt;</b>	10,860,812			

	0 (2013)  Statement of Functional Expenses				Page 10
	n 501(c)(3) and 501(c)(4) organizations must con	nolete all columns. A	Il other organization	s must complete co	lumn (A)
	Check if Schedule O contains a respon			s mast complete col	<i>□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ </i>
Do no	t include amounts reported on lines 6b, 7b.	(A)	(B)	(C)	<u>.</u> (D)
	, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	1,953,599	1,953,599	general expenses	expenses
2	Grants and other assistance to individuals in the United States See Part IV, line 22	15,600	15,600		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	13,000	13,000		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	186,115		186,115	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	1,650,725	992,567	658,158	
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	144,272	77,769	66,503	
9	Other employee benefits	343,993	200,676	143,317	
10	Payroll taxes	131,550	71,250	60,300	
11	Fees for services (non-employees):				
a	Management	13,656		13,656	
b	Legal	10,616		10,616	<del> </del>
d	Lobbying	13,610		13,610	<del></del>
e	Professional fundraising services. See Part IV, line 17				<u></u>
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	190,608	104,507	86,101	
14	Information technology				
15	Royalties				
16 17	Occupancy	219,775	95,661	124,114	
17 18	Travel	202,714	164,800	37,914	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	570,236	278,760	291,476	
20	Interest	370,230	270,700	231,470	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	30,118	17,468	12,650	
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.)			į	
•	•	4 00 4 00 7			
a b	TennisLink Direct Program	4,084,605	4,084,605		
C	Membership Services	801,917 91,472	801,917 91,472		
ď	IIS Open	40,110	40,110		<u> </u>
e	All other expenses	70,110	40,110		
25	lotal functional expenses. Add lines 1 through 24e	10,695,291	8,990,761	1,704,530	
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)	. Joseph	3,330,731	1,704,330	

	ait A	Check if Schedule O contains a response or	r note to	any line in this Per	+ ∨		<del></del>	
		oricer il occidente o contains a response oi	i note to	any line in this Par	(A) Beginning of year		(B) End of year	
	1	Cash-non-interest-bearing		<del> </del>	465,821	1	577,341	
	2	Savings and temporary cash investments				2	0,7,041	
	3	Pledges and grants receivable, net	<del></del>	3				
	4	Accounts receivable, net			164,847	4	119,478	
	5	Loans and other receivables from current and trustees, key employees, and highest co-Complete Part II of Schedule L	former o ompensa	fficers, directors, ted employees.		5		
ts	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), ar sponsoring organizations of section 501(c)(9) volunorganizations (see instructions). Complete Part II of Sche	efined under section uting employers and bloyees' beneficiary		6			
Assets	7	Notes and loans receivable, net				7		
As	8		Inventories for sale or use					
	9				178,277	8	150,085	
	10a	Land, buildings, and equipment: cost or	,	· · · · ·	170,277		130,063	
		other basis. Complete Part VI of Schedule D	10a	365,521				
	b	Less: accumulated depreciation	10b	299,108	78,431	100	66,413	
	11	•			1,204,748		1,316,799	
	12	Investments—other securities. See Part IV, line		1,204,140	12	1,310,733		
	13	Investments-program-related. See Part IV, line	·	13				
	14	Intangible assets		14				
	15	Other assets. See Part IV, line 11			540		540	
	16	Total assets. Add lines 1 through 15 (must equa			2,092,664	<del></del>	2,230,656	
	17	Accounts payable and accrued expenses			416,084		338,445	
	18	Grants payable	410,004	18	330,440			
	19	Deferred revenue		212,574	<del></del>	264,806		
	20	Tax-exempt bond liabilities				20	204,000	
	21	Escrow or custodial account liability. Complete		<u> </u>		21		
S	22	Loans and other payables to current and for						
Liabilities		trustees, key employees, highest comper disqualified persons. Complete Part II of Schedu	nsated (	employees, and		22		
Ë	23	Secured mortgages and notes payable to unrela		<b>⊢</b>	<del></del>	23		
	24	Unsecured notes and loans payable to unrelated		· —		24	<del></del> -	
	25	Other liabilities (including federal income tax,	•				<del></del>	
		parties, and other liabilities not included on lines						
		of Schedule D			65,139	25	63,016	
	26	Total liabilities. Add lines 17 through 25			693,797		666,267	
es		Organizations that follow SFAS 117 (ASC 958 complete lines 27 through 29, and lines 33 an	), check	here ▶ ☐ and	000,707		000,201	
Net Assets or Fund Balances	27	Unrestricted net assets			1,398,867	27	1,564,389	
竇	28	Temporarily restricted net assets			1,330,007	28	1,304,363	
B	29	Permanently restricted net assets				29		
ڃ		Organizations that do not follow SFAS 117 (ASC 9						
ř		complete lines 30 through 34.		_				
ţ	30	Capital stock or trust principal, or current funds			30	· - · · · · · · · · · · · · · ·		
Šē	31	Paid-in or capital surplus, or land, building, or ed				31	<del></del>	
As	32	Retained earnings, endowment, accumulated in			32			
Šet	33	Total net assets or fund balances			1,398,867	33	1,564,389	
_	34_	Total liabilities and net assets/fund balances .			2,092,664		2,230,656	

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.

За

3b

Form **990** (2013)

Schedule O.

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

2013
Open to Public Inspection

OMB No 1545-0047

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

		that have filed 1 offit 37 00 (election diff		•	•
		that have NOT filed Form 5768 (electio			·
		," to Form 990, Part IV, line 5 (Proxy	Tax) or Form 990-E	Z, Part V, line 35c (Proxy T	ax), then
	ection 501(c)(4), (5), or (6) orga of organization	inizations. Complete Part III.		Employer iden	tification number
	•			' '	
	States Tennis Association				23-7417933
Part		e organization is exempt und			organization.
1		the organization's direct and indire			
2					·
3	volunteer nours				
Part	I-B Complete if the	e organization is exempt und	er section 501(	c)(3).	
1	Enter the amount of any	excise tax incurred by the organiza	ation under section	n 4955 ▶ \$	· · · · · · · · · · · · · · · · · · ·
2	Enter the amount of any	excise tax incurred by organization	n managers under	section 4955 ▶ \$	
3		ed a section 4955 tax, did it file Fo			
4a					Tyes No
b	If "Yes," describe in Part				<b>_</b> _
Part		e organization is exempt und			(c)(3).
1	Enter the amount direct	ly expended by the filing organiz	ation for section	527 exempt function	<u> </u>
	activities			▶ \$	
2	Enter the amount of the	filing organization's funds contrib	outed to other ora	anizations for section	
	527 exempt function acti	vities		<b>&gt;</b> \$	
3	Total exempt function e	expenditures. Add lines 1 and 2	. Enter here and	on Form 1120-POL,	
4		n file Form 1120-POL for this year			
5		ses and employer identification nu			
Ū		ents. For each organization listed,			
	the amount of political co	ontributions received that were pro	mptly and directly	delivered to a separate p	olitical organization, such
		fund or a political action committee			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from 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-
(1)		· · · · · · · · · · · · · · · · · · ·			
('')					
(2)					
(3)			-		
	<del></del>				
(4)		<b></b>	1		
(5)					
<del></del>	<u> </u>				
(6)			1		
			1		I

Schedule C	(Form 990	or 99	0-F7	2013
	(1 01111 230	U1 34		/ 2010

SCITE	dule C (Form 990 or 990-EZ) 2013					Page 2
Pa	t II-A Complete if the organization section 501(h)).	ı is exempt ı	under section 50	01(c)(3) and file	d Form 5768 (ele	
A	Check ► ☐ if the filing organization beloname, address, EIN, expen					up member's
В	Check ▶ ☐ if the filing organization che			rol" provisions	apply.	
	Limits on Lobby				(a) Filing	(b) Affiliated
	(The term "expenditures" me	ans amounts	paid or incurred.	)	organization's totals	group totals
1	a Total lobbying expenditures to influence	public opinion	(grass roots lobby	ring)		
	b Total lobbying expenditures to influence:	a legislative bo	ody (direct lobbying	g)		
	c Total lobbying expenditures (add lines 1a	and 1b) .				
	d Other exempt purpose expenditures					
	e Total exempt purpose expenditures (add	lines 1c and 1	d)			
	f Lobbying nontaxable amount. Enter t columns.	he amount fi	om the following	table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:		
	Not over \$500,000	20% of the ar	nount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.				
	g Grassroots nontaxable amount (enter 25)	% of line 1f)				
	h Subtract line 1g from line 1a. If zero or les	•				
	Subtract line 1f from line 1c. If zero or les					
	If there is an amount other than zero reporting section 4911 tax for this year?		1h or line 1i, did	•		Yes No
	(Some organizations that made columns below. S	de a section 5 See the instru	ctions for lines 2a	not have to com through 2f on p		
	Lobbying	Expenditures	During 4-Year Av	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	(d) 2013	(e) Total
2	a Lobbying nontaxable amount					
	b Lobbying ceiling amount (150% of line 2a, column (e))					
	c Total lobbying expenditures					
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))					
	f Grassroots lobbying expenditures					

Part .	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fi (election under section 501(h)).	led	Form	5768		
	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a	1)		(b)	
aesci	iption of the lobbying activity.	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					_
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				_	
į	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), C	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	<b>✓</b>	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? .  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			3		✓
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OF answered "Yes."	(b)	Part	III-A,	line :	3, is
1	Dues, assessments and similar amounts from members	٠.	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	OT				
а	Current year		2a			
b	Carryover from last year		2b			
c	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of t					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbyi					
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5		_	
Par	Supplemental Information				_	_
Provid	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grou	p list	t): Par	t II-A.	ine 2:	and
	-B, line 1. Also, complete this part for any additional information.	•	•	•	•	
				•••••		
				·		

Schedule C (For	rm 990 or 990-EZ) 2013	Page 4
Part IV	Supplemental Information (continued)	
•		
	***************************************	
- <b></b>		••••
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	•••••••••••••••••••••••••••••••••••••••	
		•
		•
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	•••••••••••••••••••••••••••••••••••••••	
		·

## SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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.

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

Employer identification number

OMB No 1545-0047

Open to Public Inspection

	States Tennis Association Inc Midwest Section	23-7417933
Par		
	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 funds are the organization's property, subject to the organization's exclusive legal contri	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grantees only for charitable purposes and not for the benefit of the donor or donor advisor, or conferring impermissible private benefit?	for any other purpose
Part		
	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	of an historically important land area
	☐ Protection of natural habitat ☐ Preservation of	of a certified historic structure
	☐ Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contributi	ion in the form of a conservation
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	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 ter tax year ▶	minated by the organization during the
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, in violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation	_ : • • <u>_</u> : • •
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation eas	sements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements (i) and section 170(h)(4)(B)(ii)?	of section 170(h)(4)(B)
9	In Part XIII, describe how the organization reports conservation easements in its revenu balance sheet, and include, if applicable, the text of the footnote to the organization's fi organization's accounting for conservation easements.	nancial statements that describes the
Part	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	<u>.                                    </u>
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in it works of art, historical treasures, or other similar assets held for public exhibition, e public service, provide, in Part XIII, the text of the footnote to its financial statements the	education, or research in furtherance of
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its works of art, historical treasures, or other similar assets held for public exhibition, e public service, provide the following amounts relating to these items:	revenue statement and balance shee ducation, or research in furtherance o
	(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 following amounts required to be reported under SFAS 116 (ASC 958) relating to these	ar assets for financial gain, provide the
a b	Revenues included in Form 990, Part VIII, line 1	

	-		
Schedule D	(Form	990)	2013

Part	Organizations Maintaining	Collection	s of Art, Hi	storical	<b>Treasures</b>	, or Ot	ther Similar A	Assets (continued)
а	☐ Public exhibition		d	☐ Loa	n or exchang	ge prog	rams	
b	☐ Scholarly research		е	☐ Oth	er			
С	☐ Preservation for future generations	<b>;</b>						
4	Provide a description of the organizat XIII.	ion's collect	ions and exp	lain how	they further	the org	ganization's ex	empt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather	than to be n	naintained as					
Part								
	Complete if the organization 990, Part X, line 21.						•	
1a	Is the organization an agent, trustee, included on Form 990, Part X?							
b	If "Yes," explain the arrangement in Pa	art XIII and c	omplete the t	ollowing	table:			Amount
С	Beginning balance					10	;	
d	Additions during the year					10	<u> </u>	
e	Distributions during the year					16	•	
f	Ending balance					11		
2a	Did the organization include an amoun							
	If "Yes," explain the arrangement in Pa	art XIII. Chec	k here if the	explanati	on has been	provid	ed in Part XIII	🗆
Part	V Endowment Funds.							
	Complete if the organization	answered	"Yes" to Fo	m 990,	Part IV, line	10.		
		(a) Current y	ear <b>(b)</b> P	rior year	(c) Two year	rs back	(d) Three years b	ack (e) Four years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships			_				
е	Other expenditures for facilities and			_				
	programs							
f	Administrative expenses							
g	End of year balance					•		
2	Provide the estimated percentage of the	he current ve	ear end balar	ce (line 1	la, column (a	i)) held	as:	
а	Board designated or quasi-endowmer	-	%	,				
b	Permanent endowment ▶							
С	Temporarily restricted endowment ▶		%					
	The percentages in lines 2a, 2b, and 2	c should ea	ual 100%.					
3a	Are there endowment funds not in the			ization t	hat are held	and ac	Iministered 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 organi							3b
4	Describe in Part XIII the intended uses					•		. [55]
Part							<u> </u>	
	Complete if the organization		"Yes" to Fo	m 990	Part IV. line	11a. S	See Form 990	). Part X. line 10
	Description of property		st or other basis		t or other basis		Accumulated	(d) Book value
	_ cost.p.ic. o. proporty	1	nvestment)	1 , ,	(other)		epreciation	(a) Dook value
1a	Land			<del>                                     </del>				
b	Buildings	·		+				
C	Leasehold improvements	.		+		<del></del>		
d	Equipment			+	2CE E24	-	200 100	
e	Other	:		+	365,521		299,108	66,413
	Add lines 1a through 1e. (Column (d) m	nust equal Fr	orm 990 Pari	X colun	nn (R) line 10	2/c) l		<u> </u>
	(a) //	,,, ,, , , (	000, 1 are	, Joini	(2), 11116 1	10//		İ

Part VII	Investments – Other Securities Complete if the organization ans		000	Dort IV line	11b Coo Form	000 Part V line 10
	(a) Description of security or category (including name of security)			Book value	(c) Met	hod of valuation -of-year market value
(1) Financial	derivatives					
	neld equity interests					
(3) Other	· · · · · · · · · · · · · · · · · · ·					
(A)						
(B)						
(D)			 			
(E)						
(F) (G)			<u> </u>			
(H)						
	b) must equal Form 990, Part X, col. (B) line 12.)					<del></del>
Part VIII	Investments – Program Related Complete if the organization ans		m 990	Part IV line	11c See Form	990 Part X line 13
	(a) Description of investment	WOIGG 103 1010I		Book value	(c) Me	thod of valuation -of-year market value
(1)		<del></del> -	<del></del>			
(2)						
(3)						
_(4)						
_(5)						
_(6)			_			
_(7)						
		<del></del> .	ļ			
(9)	(b) must equal Form 990, Part X, col (B) line 13.)	······				
Part IX	Other Assets.				<u>-</u>	
	Complete if the organization ans	wered "Yes" to For	m 990	, Part IV, line	11d. See Form	990, Part X, line 15.
(1) Accrue	d bond interest	<u> </u>		<del></del>		540
(2)	a bona marosc					
(3)						
(4)						
(5)						
(6)		· · · · · · · · · · · · · · · · · · ·			<u>-</u>	
_(7)						
(8)		<del></del>				
(9)	man (h) must squal Form 000 Dort V	ol (D) (100 15 )				
Part X	Other Liabilities. Complete if the organization ans line 25.		m 990	), Part IV, line	▶ 11e or 11f. See	Form 990, Part X,
1.	(a) Description of liability	(b) Book value			<del></del> -	
(1) Federal II	ncome taxes					
(2) Payroll	Tax Withholding	19,	176.42			
	iabilities		43,840			
(4)						
(5)						
(6)						
(7)						
(8)						
(9)	(h) must actual Form 000 Part V and (B) line 05 1	<del> </del>				
	(b) must equal Form 990, Part X, col. (B) line 25 ) r uncertain tax positions. In Part XIII, prov		63,016	the organization	'e financial etatom	ante that reports the
organization	's liability for uncertain tax positions unde	r FIN 48 (ASC 740). Ch	eck her	e if the text of t	he footnote has bee	en provided in Part XIII

Part	Reconciliation of Revenue per Audited Financial Statem Complete if the organization answered "Yes" to Form 990,		-	Return.	
_ <u>`</u>	Total revenue, gains, and other support per audited financial statements			1	200,000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			- <del>-'</del>	6,769,066
a	Net unrealized gains on investments	2a		1 1	
ь	Donated services and use of facilities	2b			
C	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d	260,000		
e				2e	260,000
3	Subtract line <b>2e</b> from line <b>1</b>			3	6,509,066
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	4,351,746		
C	Add lines 4a and 4b			4c	4,351,746
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	10,860,812
Part			•	er Return.	•
	Complete if the organization answered "Yes" to Form 990,	Part IV,	line 12a		
1	Total expenses and losses per audited financial statements			1	6,603,544
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1			
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
C	Other losses		<del></del>		
d	Other (Describe in Part XIII.)		260,000	1	
е 3	Add lines 2a through 2d			2e 3	260,000
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	i i		3	6,343,544
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)		4.091.747		
c			4,091,747	4c	4,091,747
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, Iii			5	10,435,291
Part	XIII Supplemental Information.				10, 100,201
2; Part	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part				
4b - Pr	ogramming expense				
Part XI	 				
2b - Ex	pense in a wash transaction			<b></b>	
4b - Pr	ogramming Expense	••••			

Schedule D (For	orm 990) 2013	Page <b>5</b>
Part XIII	Supplemental Information (continued)	
•		
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		•••••
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		· <del>-</del>
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# **SCHEDULE 1** (Form 990)

OMB No 1545-0047

Open to Public Inspection

**ջ** □

□Yes

23-7417933

2013

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 Employer identification number Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . . . . . . . . . . . . ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990. the selection criteria used to award the grants or assistance? United States Tennis Association Inc Midwest Section

Part I General Information on Grants and Assistance Department of the Treasury Internal Revenue Service Name of the organization

Part II

	ratify, life 2.1, for any recipient trial everyed finds that \$0,000; for the control of the cont	ובכולופווו ווימו	וברפואפת יייסופ וו	מון ליסיסים ומור	a car oc dupilo	Mothed of indication	יייייייייייייייייייייייייייייייייייייי	
<b>-</b>	1 (a) Name and address of organization or government	( <b>9</b> )	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of non-cash assistance	(n) Purpose of grant or assistance
(E)	(1) See Attached	:		1,953,599				
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€								
<u>©</u>								
9								
E								
<b>®</b>								
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(10)								
Ē								
(12)								
0 W	Enter total number of section 501(c)(3) and government organizat Enter total number of other organizations listed in the line 1 table	501(c)(3) and gov yanizations listec	vernment organizat	ons .	ne 1 table	listed in the line 1 table		<b>A A</b>

Schedule I (Form 990) (2013)

Cat. No. 50055P

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

Schedule   (Form 990) (2013)  Part III Grants and Other Assistance to Individuals in Part III can be duplicated if additional space is	to Individuals in the Unitional space is needed.	United States. Com d.	plete if the organiz	ation answered "Yes" to	Page 2 in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.7 needed.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Cash Grant	45	15,600			
			į.		
Complemental Information Dearling the information and in Doct I line 2 Doct III and any attachment information	a citomas da chi	-	amilee III to G C	ilpho sodio (a)	in formation
The USTA/Midwest Section requires that all their districts submit a copy of their 990 ,audited financials and minutes of the organization.	istricts submit a copy of ti USTA/Midwest Section di	heir 990 ,audited financ rect operation, we requ	ials and minutes of the receipts for the exp	e organization. penses the funding was mear	t to cover.
		1 1 8 8 6 6 6 8 8 8 8 8 8 8 8 8 8 8 8 8	1		
					Schedule I (Form 990) (2013)

## **SCHEDULE J** (Form 990)

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

OMB No 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► See separate instructions.
 Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

**Employer identification number** United State Tennis Association Inc Midwest Section
Part I Questions Regarding Compensation 23-7417933

	Table 1			
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form		Yes	No
	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)			
L	If any of the house on line to are absolved and the appropriation follows a symptom malless recording a symptom			
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		
		15		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked 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, but explain in Part III.			
	✓ Compensation committee			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	✓ Form 990 of other organizations             ✓ Approval by the board or compensation committee             ✓ Approval by the board or compensation committee             ✓ 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:			
а	Receive a severance payment or change-of-control payment?	4a		1
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		1
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		1
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 201/21/00 and 501/21/00 a			
5	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.  For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
J	compensation contingent on the revenues of:			
а	The organization?	5a		7
	Any related organization?	5b		1
-	If "Yes" to line 5a or 5b, describe in Part III.			<del>                                     </del>
				Į.
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:	L		
а	The organization?	6a		✓
b	Any related organization?	6b		
	If "Yes" to line 6a or 6b, describe in Part III.		:	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			<u> </u>
•	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		1
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject	<b>_</b>		<del>                                     </del>
_	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		✓
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	١ ۵	l	1

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

(F) Compensation reported as deferred in prior Form 990 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 W-2 and/or 1099-MISC compensation (E) Total of columns (B)(I)-(D) (D) Nontaxable benefits (C) Retirement and other deferred compensation (iii) Other reportable compensation instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. (ii) Bonus & incentive compensation 186,115 108,600 100,950 (i) Base compensation EE EΞ  $\equiv$ (E) (E) ≘ ≘ EE  $\odot$  $\epsilon \epsilon$ Dorian A Dyson, Director Of 2 Finance Mark Saunders, Executive 1 Director (A) Name and Title 3 Diane Ansay 4 ß ဖ 7 æ 6 우 9 F 42 3 4 15

Schedule J (Form 990) 2013

Page	r Part II. Also complete this pa									
	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 pa for any additional information.									
	Part I, lines 1a, 1b, 3, 4a, 4b, 4c									
 	n, or descriptions required for F									
Schedule J (Form 990) 2013	Provide the information, explanation for any additional information.									

## **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, or Form 990-EZ, Part V, line 38a or 40b.
 ► Attach to Form 990 or Form 990-EZ.
 ► See separate instructions.
 ► Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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 Assoc									23-7	4179	33		
Part								anizations only). Sa or 25b, or Fo		D-EZ,	Part \	V, lıne	40b.	
1	(a) Name of diagnalified		(b) Relationship be			person and		(a) December	- of two				(d) Con	rected?
ı	(a) Name of disqualified	person		organiza	ation			(c) Descriptio	n or trar	isaction	1		Yes	No
(1)								-						
(2)				_										
(3)		_												
(4)					-		-							
					-					-			-	<b>-</b>
(5)				<del></del>	•		<del>-</del>				_			
(6) 2	Enter the amount under section 4958				_	-		ied persons du	ring tl	ne ye	ar ▶ \$			
3	Enter the amount o									. 1	<b>▶</b> \$			
					-	_								
Part	Complete if the	lor From Interne organization eported an am	answered "Ye	s" on				38a or Form 9	90, Pa	rt IV,	line 2	6; or	f the	
(a) Na	ame of interested person	(b) Relationship with organization	(c) Purpose of loan	fro	oan to or om the nization?	(e) Origir principal an		(f) Balance due	(g) In c	lefault?	by bo	proved pard or nittee?		ritten ment?
				То	From	1			Yes	No	Yes	No	Yes	No
(1)				1	1				† <del></del>					
(2)				<del>  -</del> -	+				†				<del> </del>	
(3)		1	<u>-</u>	<del>                                      </del>									<u> </u>	<del>                                     </del>
(4)	<del></del>	<del>                                     </del>		1	+				<del> </del>			1	<del>                                     </del>	<del></del>
_ <del>(5)</del> (5)				+	<del>                                     </del>			<u> </u>	<del> </del>	-			-	_
<del>(6)</del>					<del></del>				<u> </u>	-	ļ. —	<u> </u>	-	├─
		<del> </del>		<del> </del>	+-				1		<del>                                     </del>	<del> </del>		├─
(7)		+		+		<del> </del>			+	-			_	<del> </del>
(8)		<del>                                     </del>		+	<del> </del> -				┼		-	-	-	├─
(9)				1		<del> </del>			+-					├
(10) Total			<u> </u>	J	!_	<u> </u>	. ▶	\$	+	ļ	-	<u> </u>		<u> </u>
Part	III Grants or As	sistance Bene ne organization	fiting Interest	ted Pe	rsons.		•••		1		l		l	
(a)	Name of interested person		ship between inte		(c) Amount	t of assistance		(d) Type of assistand	ce	(ө	) Purpo	se of a	ıssıstan	ice
(1)														
(2)														
(3)														
(4)														
(4) (5)										_				
(6)						•								
(6) (7)			-										_	
(8)														
(9)														
(10)			•				t -			<del> </del>				

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organia	aring of zation's nues?
					Yes	No
(1) Erika	Wentz-Russell	Daughter of	63,384	Wages		<b>✓</b>
(2)		former Officer				
(3)						
(4)						
(5)						
(6)	. <u></u>		<u> </u>			<u></u>
(7)						ļ
(8)						<u> </u>
(9)						—
(10) Part V	Supplemental Information					<u></u>
		on for responses to questions				
						<b></b>
			<b></b>			
				<del></del>		
				·	<b></b>	
	•••••					
	••••					
	<del></del>					

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

### 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.

OMB No 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization **Employer identification number** United States Tennis Association Inc Midwest Section 23-7417933 Part VI Section A Governing Body and Management 6. Did the organization have members or stockholders? - The USTA is a membership organization where its members select representatives to the Board of Directors. 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? - See #6 above. 7b. Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? - 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 Board of Directors. 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 SharePoint for our membership and volunteer base and is available to the public upon their request.

Schedule O (Form 990 or 990-EZ) (2013)	Page <b>2</b>
Name of the organization	Employer identification number
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23-7417933

USTA Midwest Section
Supporting Schedule - 2013 Form 990
Schedule I - Part II
For Year Ended December 31, 2013

Part II Grants & Other Assistance to Governments and Organizanons

										Amount		
				Indiv	Life		TennisLink		RC	of Cash	Method of	
Districts	Network	o	딤	Memb	Membership	DGI Grant	Distribution	N N	Section	Grant	Valuation	Purpose of Grant or assistance
Central Indiana Tennis Association	54,421	2,413	41,777	51,027	289	24,085	25,507	35-1404837	501 c 4	218,378	Cost	Support the District in promoting tennis
Chicago District Tennis Association	64,791	3,280	38,393	65,814	1,297	1,485	28,133	36-6118287	501 c 4	225,170	Cost	Support the District in promoting tennis
Northeastern Michigan Tennis Association	10,027	233	3,301	4,103	66	948	1,678	38-2193890	501 c 4	23,789	Cost	Support the District in promoting tennis
Southeastern Michigan Tennis Association	63,163	2,728	48,357	65,316	616	68,750	26,249	38-2193892	501 c 4	296,605	Cost	Support the District in promoting tennis
Western Michigan Tennis Association	25,219	1,635	16,159	21,682	372	5,000	10,425	38-2246953	501 c 4	89,046	Cost	Support the District in promoting tennis
Northern Indiana Tennis Association	20,468	1,068	15,476	20,726	259	9'000	9,926	31-0926461	501 c 4	80,886	Cost	Support the District in promoting tennis
Northern Illinois Tennis Association	16,703	583	16,535	14,659	219		7,767	31-0926456	501 c 7	62,131	Cost	Support the District in promoting tennis
Ohio Valley Tennis Association	73,221	4,225	43,180	63,512	888	52,469	31,045	31-0926466	501 c 4	293,389	Cost	Support the District in promoting tennis
Northeastern Ohio Tennis Association	50,337	2,480	41,032	52,605	609	27,009	23,022	34-1301372	501 c 3	214,168	Sost	Support the District in promoting tennis
Northwestern Ohio Tennis Association	23,009	1,020	15,905	18,445	185	23,307	7,487	34-1564385	501 c 4	98,164	Cost	Support the District in promoting tennis
Wisconsin Tennis Association	69,119	3,628	49,226	63,812	828	24,670	21,889	39-6283503	501 c 4	256,747	Cost	Support the District in promoting tennis
Northern Michigan Tennis Association	6,752	320	3,740	5,683	87	1,400	2,012	38-2486776	501 c 4	22,324	Cost	Support the District in promoting tennis
Mid-South Illinois Tennis Association	21.788	1108	14.874	15.672	245	6.200	5.547	35-2450075	501 c 4	72,824	Cost	Support the District in promoting tennis
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Total	499,018	24,748	347,955	464,056	6,542	241,324	200,687			1,953,599		
Total												
Dietart Network Support Great	400 018											
Conference Company Comment	100,010											
	047,933											
Dist - Individual Memb Allocation	464,030											
Dist - Organization Allocation	24,748											
Life Membership	6,542											
DGI Grant	241,324											
Other Support	169,270											
TennisLink Distribution	200,687											
Sub Total	1,953,599											
Other Grants	0											
Total	1,953,599											