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

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	~ r	Ot 1111	2013 Calendar year, or tax year beginning	enumg					
	B Ci	heck if	C Name of organization		D Employer identification	n number			
	_	Addre							
	$\overline{}$	Name			74-2182	2392			
		Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number				
	$\vdash$	Termi		1100111/00110		512-443-1334			
		Jated Amen	ded Ohandan and TD or former and and		G Gross receipts \$	5,098,240.			
		Jretum Applic			H(a) Is this a group return				
		Jtion pendi			for subordinates?	Yes X No			
			SAME AS C ABOVE		H(b) Are all subordinates include				
		20.00	empt status:	or 527	4 ' '				
			te: NWW.TEXAS.USTA.COM	01 021	H(c) Group exemption nui	•			
			organization: X Corporation	I Vear	of formation: 1981 M State				
	Pa		Summary	L Tour	or formation, 23 0 2 W Out	te of legal dofficile.			
		1	Briefly describe the organization's mission or most significant activities: DEVE:	JOP &	PROMOTE THE GE	ROWTH OF			
	Activities & Governance	•	TENNIS IN TEXAS.						
	ž	2	Check this box   if the organization discontinued its operations or dispose	sed of more	than 25% of its net assets				
	اق	3	Number of voting members of the governing body (Part VI, line 1a)		3	37			
	8	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	37			
	es	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	28			
	Σŧ	6	Total number of volunteers (estimate if necessary)	-	6	200			
	Ç	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	73,108.			
		b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.			
					Prior Year	Current Year			
	<u>o</u>	8	Contributions and grants (Part VIII, line 1h)		2,495,188.	2,573,451.			
	盲	9	Program service revenue (Part VIII, line 2g)	<u> </u>	2,440,458.	2,517,806.			
	Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		7,352.	6,905.			
	۳	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		210.	78.			
	$\Box$	12	Total revenue · add lines போறுநூர் (ருப்ரு equal Part VIII, column (A), line 12)		4,943,208.	5,098,240.			
		13	Grants and similar amounts paid (Part IX, column (A) lines 1-3)		247,142.	255,585.			
		14	Benefits paid to or for members (Part IX, column (A) line 4)		0.	0.			
	es	15	Salaries, other compensation, employee behefits (Part IX, column (A), lines 5-10)		1,773,326.	1,877,664.			
	Expenses		Professional fundraising fees (Part IX, column (A), ine 11e)	. L	0.	0.			
	ă	b	Total fundraising expenses (Part IX, column (4), line 25)  Other expenses (Part IX, column (4), lines 11a 11d, 11f-24e)	<u>0.</u> [					
	۳			<u> </u>	2,794,757.	2,932,293.			
		18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,815,225.	5,065,542.			
		19	Revenue less expenses. Subtract line 18 from line 12		127,983.	32,698.			
	s or	ŀ		Be	ginning of Current Year	End of Year			
-^-	set	20	Total assets (Part X, line 16)		3,267,566.	3,357,814.			
NGZ	Net Assets ( Fund Balanc	21	Total liabilities (Part X, line 26)	<u> </u>	510,783.	393,696.			
			Net assets or fund balances. Subtract line 21 from line 20		2,756,783.	2,964,118.			
S		ırt II							
<del>~~</del> ¦	Unde	er pen	alties of perjury, I declare that I have examined this return, including accompanying schedule	es and statem	ients, and to the best of my kno	wledge and belief, it is			
	true,	corre	ct, and complete, Declaration of preparer (other than officer) is based on all information of w	hich preparei	r has any knowledge	2014 —			
<b>E</b>			Signature of officer		Date				
	Sigr		• • • • • • • • • • • • • • • • • • •	D	Date				
	Her	е	KENNETH MCALLISTER, EXECUTIVE DIRECTO Type or print name and title	K	<del></del>				
ر بيا				77	Date Check	PTIN			
	Paid	,	Print/Type preparer's name  RONALD H. REYNOLDS  Preparer's signature	///	""" "	P00964479			
CENNYJO		arer	RONALD H. REYNOLDS  FIRM'S name REYNOLDS & FRANKE, P.C.	<u> </u>		4-2516372			
	-	Only	Firm's address 6836 AUSTIN CENTER BLVD., SUITE	250	Firm's EIN 7	Z 4JIUJ14			
(C)	Jac	Jiny	AUSTIN, TX 78731	2,70	Phone no. (512	) 206-3141			
	N. 4 - :	. 41 1	*		Triione no. ( JIZ	11			
			RS discuss this return with the preparer shown above? (see instructions)		<del> </del>	Yes No No Form <b>990</b> (2013)			
	JJ20	01 10-	29-13 LHA For Paperwork Reduction Act Notice, see the separate instructi	U115.		FUITH <b>330</b> (2013)			

Form 990 (2013)

Form.990 (2013) USTA TEXAS SECTION
Part IV Checklist of Required Schedules

			res	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		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	<u> </u>
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		Х
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	X	
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
_	Schedule D, Part III	8_		<u> </u>
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		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			<del></del>
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
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.			
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	Х	
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	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
a	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		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	Х	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	İ	.,	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a	ļ	<u> </u>
U	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		х
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		Х
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		1	<sub>v</sub>
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	<del>                                     </del>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		х
20·2	complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a	<del>                                     </del>	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	<del></del>	<del> </del>
			990	(2013)
				/

Form 990 (2013) USTA TEXAS SECTION
Part IV 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	X	
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	_X	
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		<u>X</u>
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		X
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		
	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		X
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		<u>X</u>
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,	1		
	complete Schedule L, Part II	26		X
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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	ļ		{
	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		X
b		28b	-	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		x
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		x
	contributions? If "Yes," complete Schedule M	30_		<del>  ^</del> -
31	Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		<del></del>
32	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>	╁┈─	<del></del>
~	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
٠.	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	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		х
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			l —
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
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	Х	
		Form	990	(2013)

orm	990 (2013) USTA TEXAS SECTION 74-2182	392	_ P	age <b>5</b>
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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 28			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			m. 100
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
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	Х	
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		Х
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.	.		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	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	Х	<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			٠,,
	were not tax deductible?	6b		Х
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	<u> </u>	Х
b	, , , , , , , , , , , , , , , , , , , ,	7b		
С			1	
	to file Form 8282?	7c	ļ	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	┨_ ゚		x
e		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	ļ	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	-	-
h		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		
0		<b> </b>	^.	,
9	Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?	9a	<b>_</b> ` -~	1
a		9b		<del>                                     </del>
ь 10	Section 501(c)(7) organizations. Enter:			1
а	Initiation fees and capital contributions included on Part VIII, line 12			
b		1		
11	Section 501(c)(12) organizations. Enter:	1		
	Gross income from members or shareholders			
b		1		,
	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	· -	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1	1	1
	Is the organization licensed to issue qualified health plans in more than one state?	13a	1	<b>1</b>
_	Note. See the instructions for additional information the organization must report on Schedule O.			† <sup></sup>
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1		
_	organization is licensed to issue qualified health plans			[

14a

14b

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

**b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form.990 (2013)

USTA TEXAS SECTION

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Page 6

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

<u></u>	Check if Schedule O contains a response or note to any line in this Part VI		<del></del>								
<u>Sec</u>	tion A. Governing Body and Management			-							
		1	37		Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	37								
	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 0.	۱	37			·					
b	Enter the number of voting members included in line 1a, above, who are independent	<u>1b</u>									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other			X.					
	officer, director, trustee, or key employee?			_2		_					
3	Did the organization delegate control over management duties customanly performed by or under the	ne direc	ct supervision			₩					
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form		is filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's as	ssets?	•	5 6	Х						
	6 Did the organization have members or stockholders?  7- Did the organization have members at soldholders, or other namena who had the newer to elect or appoint one or										
7a	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?		alalana an	7a	Х	<del> </del>					
b	<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?										
_	persons other than the governing body?		o followens	7b	X	ļ					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by u	e tollowing.		х						
	The governing body?			8a	X	<del>                                     </del>					
	Each committee with authority to act on behalf of the governing body?		-4.41	8b		<del> </del>					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	acneo	at the	9		х					
500	organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal F	Povonu	Code l	9							
360	tion B. Foncies (This Section B requests information about policies not required by the internal r	1CVC/100	= Code )	:	Yes	No					
100	Did the organization have level chanters branches or affiliates?			10a	162	X					
10a	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such or a su	shantar	e offiliatoe	104		<del></del>					
b		Jiaptei	s, annates,	10b							
112	and branches to ensure their operations are consistent with the organization's exempt purposes?  a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?										
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	a, 50.0	are many trie term.	11a	Х	$\vdash$					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to con	flicts?	12b	Х	$\vdash$					
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			·		$\vdash$					
·	in Schedule O how this was done	,		12c	х						
13	Did the organization have a written whistleblower policy?			13		X					
14	Did the organization have a written document retention and destruction policy?			14	Х	$\vdash$					
15	Did the process for determining compensation of the following persons include a review and approximately a series of the process for determining compensation of the following persons include a review and approximately a series of the process for determining compensation of the following persons include a review and approximately a series of the process for determining compensation of the following persons include a review and approximately a series of the process for determining compensation of the following persons include a review and approximately a series of the process for determining compensation of the following persons include a review and approximately a series of the process for determining compensation of the following persons include a review and approximately a series of the process for the	 val bv ıı	ndependent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision					1					
а	The organization's CEO, Executive Director, or top management official			15a	X	1					
	Other officers or key employees of the organization			15b		Х					
-	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 arrange	ement v	vith a								
	taxable entity during the year?			16a		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its	participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization										
	exempt status with respect to such arrangements?			16b							
Sec	tion C. Disclosure		·								
17	List the states with which a copy of this Form 990 is required to be filed ► NONE										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	T (Sec	tion 501(c)(3)s only) :	avaılab	ole						
for public inspection. Indicate how you made these available. Check all that apply.											
	Own website Another's website X Upon request Other (explain in Schedule O)										
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	conflict	of interest policy, an	d finar	ncial						
	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 red	ords of the organiza	tion:	<b>-</b>						
	KEN MCALLISTER - 512-443-1334 8105 EXCHANGE DRIVE AUSTIN TX 78754										
	DIUS BACHANGB UKIVE AUSTIN TX /8/54										

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Page 7

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

SECTION

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 employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

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

(A)	(B)	T -		((	<del></del>			(D)	(E)	(F)
Name and Title	Average	l (do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pe	rson	s bot	h an	compensation	compensation	amount of
	week	<del>-</del>	cer an	dad	recto	r/trus	itee)	from	from related	other
	(list any	Individual trustee or director					1	the	organizations	compensation
	hours for	ē	   8			ated	Ì	organization	(W-2/1099-MISC)	from the
	related organizations	aşşa	trust		   8	Suadu		(W-2/1099-MISC)		organization
	below	를	tonal		gloy	t con				and related organizations
	line)	ş	nstitutional trustee	Officer	Key employee	Highest compensated employee	Богтег			Organizations
(1) DAN BARTA	5.00	=	=	3	×	± &	1	· ·	· · ·	
PRESIDENT		X		X				0.	0.	0.
(2) FRANK KELLY	5.00	<u> </u>								
VICE PRES-ADMINSTRATION		X		Х				0.	0.	0.
(3) KATHLEEN WU	5.00									
VICE PRES-RECREATIONAL		X		Х				0.	0.	0.
(4) RON WOODS	5.00									
VICE PRES-COMPETITIVE		X		X				0.	0.	0.
(5) TOM HUNT	5.00						ł			
TREASURER		Х		Х				0.	0.	0.
(6) SALLY BROWN	5.00						1		_	_
SECRETARY		Х		X				0.	0.	0.
(7) ALFREDO TREVINO, JR.	5.00									_
USTA DELEGATE		X		L		<u> </u>		0.	0.	0.
(8) ROBERT RUBEL	5.00	ļ	1			1	l		_	_
CHAIR NOMINATING COMM		Х				<u> </u>		0.	0.	0.
(9) TINA ANDERSON	5.00	ļ								
EXEC COMM MEMBER		X				1		0.	0.	0.
(10) KENNETH BLAKELY	5.00	۱								
EXEC COMM MEMBER		X	<u> </u>	ļ		ــــ	ļ	0.	0.	0.
(11) JIM CHAFFIN	5.00	<b> </b>				ŀ				
EXEC COMM MEMBER	5 00	X	<u> </u>	_			<u> </u>	0.	0.	0.
(12) ED CHEW	5.00	١.,				İ	l			•
EXEC COMM MEMBER	<u> </u>	X	ļ	<u> </u>	-	<u> </u>	<u> </u>	0.	0.	0.
(13) KEVIN COLLINS	5.00	٠,		l		i				_
EXEC COMM MEMBER	F 00	X	<u> </u>	<u> </u>	<u> </u>	┢	<u> </u>	0.	0.	0.
(14) MURRAY COULTER	5.00	١,,				l				_
EXEC COMM MEMBER	1 - 00	X	⊢	<u> </u>	<u> </u>	<b> </b>	ļ	0.	0.	0.
(15) EMILY COXE	5.00	٠,								
EXEC COMM MEMBER		Х	├	-	<u> </u>	┝	⊢	0.	0.	0.
(16) RAY DELK	5.00	<b>₩</b>			1			0.		_
EXEC COMM MEMBER	5.00	X	<del> </del>	<del> </del>	<u> </u>	<del> </del>	├-	1 0.	0.	0.
(17) KENNI DRIVER EXEC COMM MEMBER	3.00	X				ŀ		0.	0.	_
EARC COMM MEMBER		V	Ц_			<u>L.</u>	<u> </u>	<u> </u>	L	0 . Form <b>990</b> (2013)

- 411	Section A. Officers, Directors, Trus	tees, key Em	pioy	ees	, an	O HI	gne	St C	ompensated Employe	es (continueu)			
	(A)	(B)	(C)						(D)	(E)			(F)
	Name and title	Average	(do			ition more	l than	one	Reportable	Reportable	l		timated
		hours per	box	, unle	ss pe	erson	ıs bot or/trus	h an	compensation	compensation	ו י		ount of
		week (list any	├-	wi		T	<b></b>	u,	from	from related			other
		hours for	Individual trustee or director		1				the organization	organizations (W-2/1099-MIS			pensation om the
		related	9 0 0	ig E		1	sated		(W-2/1099-MISC)	(44-27 1099-14113	۲ ا		anization
		organizations	ruste	il trustee		8	mpeu		(** 2, 1000 *********************************			-	related
		below	dual	tous	Ļ	e e	st co	   =					nızations
		line)	N Pul	Institutional	Officer	Key employee	Highest compensated employee	E E	[				
(18) E	BEN ESHLEMAN	5.00		T									
EXEC C	COMM MEMBER		X			l			0.		0.		0.
(19) F	RON FISHER	5.00				П			·				
EXEC C	COMM MEMBER		X	<u> </u>					0.		0.		0.
(20) 3	YVONNE GARTON	5.00											
EXEC (	COMM MEMBER		Х		L			L	0.		0.		0.
(21)	ALLISON GETZ	5.00											
EXEC (	COMM MEMBER		Х	L		<u> </u>			0.		0.		0.
(22)	TOMMY HO	5.00	]										
EXEC (	COMM MEMBER		X			$oxed{oxed}$			0.		0.		0.
(23) h	MATT JACOB	5.00	]				1		_				_
EXEC (	COMM MEMBER		X	<u> </u>		<u> </u>	<u> </u>		0.		0.		0.
(24)	ONA LEE JOHNSON	5.00		1									_
EXEC (	COMM MEMBER		Х				<u> </u>	<u> </u>	0.		0.		0.
(25)	CHAD LOUP	5.00					1				_		_
EXEC (	COMM MEMBER		X	ļ	<u> </u>	<u> </u>		L	0.		0.		0.
	GERRY MAINGOT	5.00			l			1					_
EXEC (	COMM MEMBER		Х			<u> </u>	<u>L</u>	l	0.		0.		0.
1b S	Sub-total								0.		0		0.
	otal from continuation sheets to Part V	II, Section A							120,984.		0.		7,556.
	otal (add lines 1b and 1c)	-						<u> </u>	120,984.		0.		7,556.
	otal number of individuals (including but n	ot limited to th	nose	list	ed a	bov	e) w	ho r	eceived more than \$100	0,000 of reportable	е		1
c	compensation from the organization												Yes No
• -						1			LL4		1	,	Tes No
	Old the organization list any former officer,			е, к	эу е	mpi	oyee	, or	nignest compensated e	mpioyee on			x
	ne 1a? If "Yes," complete Schedule J for s							d 0+	har aamaanaatian fram	the ergenization		3	- 1
	For any individual listed on line 1a, is the si and related organizations greater than \$15	•							-	trie organization		4	х
	ond related organizations greater than \$15 old any person listed on line 1a receive or									Idual for senuces		*	
	endered to the organization? If "Yes," com							ela	ted organization or indiv	idual foi services		5	х
	on B. Independent Contractors	ipiete derieda		101 3	uc.,	per	3011						1
	Complete this table for your five highest co	mpensated in	den	end	ent :	cont	ract	ors '	that received more than	\$100,000 of com	pens	ation f	rom
	he organization. Report compensation for	•									ролю	alloni	
	(A)	tiro odioridai j	Jui	0	<u>9</u>	******	<u> </u>		(B)	, , , , ,		(C	:)
	Name and business	address	N	ON	Е				Description of s	services	C		nsation
													<del> ,</del>
					_								
										ļ			
	Pakal manufacture of the same day	San adversaria di di				,			d ab accal code a co				
	Total number of independent contractors (	_	not I	ımıte	ea te	o the	ose I ()	ISTE	a above) who received r	nore than			
	\$100,000 of compensation from the organ	zation					<del></del>						

Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, a	nd ł	ligh	est	Compensated Employ	ees (continued)		
(A)	(B)			((				(D)	(E)	(F)	
Name and title	Average				ition			Reportable	Reportable	Estimated	
	hours	(cl	neck	all 1	that	app	ly)	compensation	·		
	per							from	from related	other	
	week	_				оуве		the	organizations	compensation	
	(list any	recto				empl		organization	(W-2/1099-MISC)	from the	
	hours for related	or d	ee	ŀ		sated		(W-2/1099-MISC)		organization and related	
	organizations	ruste	ftrus		99	преп				organizations	
	below	dual	tous	_	e e	st co	<u></u>			organizations	
	line)	Individual trustee or director	institutional trustee	Officer	Key emptoyee	Highest compensated employee	Богтег				
(27) E.L. MOUNTJOY	5.00	H	H	Ē	-	<u> </u>					
EXEC COMM MEMBER		х		1			l	0.	0.	0.	
(28) JACKIE PAYNE	5.00	-			H						
EXEC COMM MEMBER		х						0.	0.	0.	
(29) MARCIA RODRIGUEZ	5.00				-	-	l	<del></del>			
EXEC COMM MEMBER		х						0.	0.	0.	
(30) LARS ROSENE	5.00						$\vdash$				
EXEC COMM MEMBER		x					l	0.	0.	0.	
(31) EMILY SCHAEFER	5.00		-								
EXEC COMM MEMBER		Х						0.	0.	0.	
(32) BARBARA SMITH	5.00										
EXEC COMM MEMBER		Х						0.	0.	0.	
(33) MEGAN SUAREZ	5.00				_		_				
EXEC COMM MEMBER		Х						0.	0.	0.	
(34) NANCY VIVERO	5.00										
EXEC COMM MEMBER		X			ļ			0.	0.	0.	
(35) CAROL WELDER	5.00										
EXEC COMM MEMBER		X		ļ				0.	0.	0.	
(36) JANEL WOERNER	5.00										
EXEC COMM MEMBER		Х						0.	0.	0.	
(37) JOHN ZIMMERMAN	5.00										
EXEC COMM MEMBER		X						0.	0.	0.	
(38) KENNETH MCALLISTER	40.00			İ	İ						
EXECUTIVE DIRECTOR		<u> </u>	<u> </u>	X	<u> </u>	<u></u>		120,984.	0.	27,556.	
		ļ	1	1							
		1	i								
	ļ	igspace	$oxed{igspace}$	lacksquare	<u> </u>		$oxed{oxed}$				
		1					ļ				
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	<b>_</b>	<u> </u>	<del> </del>	$\vdash$	-	ऻ_	-				
	<u> </u>	1	1			1					
	<del> </del>	┞-	├-		<b>├</b>	<u> </u>	₩		ļ		
		1					1				
		1-	$\vdash$	┢	┼	$\vdash$	├	ļ		<del></del>	
	<b></b>	┨									
	<u> </u>	<u>—</u>		1	<u> </u>		<u>t                                      </u>				
Total to Part VIII Section A line 15								120,984.		27,556.	
Total to Part VII, Section A, line 1c	_							120,304.	1	27,330.	

		Check if Schedule O cont	ains a response	or note to any la	ne in this Part VIII			
		٠, ٠	y		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
\$ \$	1 a	Federated campaigns	1a				, , ,	*
ig ja		Membership dues	1b		`* ,*			, . ·
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events	1c		1 , ,		1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	, , ,
護희	d	Related organizations	1d		•			3 ·
ï.E	е	Government grants (contribut	ions) 1e					, , ,
rior s	f	All other contributions, gifts, gran	ts, and	<del></del>	1,			
ğ =		similar amounts not included above	ve $ \mathbf{1f} ^2$ ,	573,451.	, , , , , , , , , , , , , , , , , , , ,			l ', ,
da	g	Noncash contributions included in lines	1a-1f \$			, ,,	, 4, 4	, , ,
<u>8</u> 8	h	Total. Add lines 1a-1f		<u> </u>	2,573,451.	, í `	*	
				Business Code		(a)	.: . i ă	111 16
<u>8</u>	2 a				1,676,731.			
Program Service Revenue	b		<u> </u>	900099	685,113.	685,113.		
n S	С	PUBLICATIONS		541800	73,108.		73,108.	
e a	d	US OPEN BOX		900099	62,274.	62,274.		
5	е	SANCTION FEES		900099	20,580.	20,580.		
۱ ۵	f	All other program service reve	enue					
$\blacksquare$	g	Total. Add lines 2a-2f		<u> </u>	2,517,806.	., 6 * .	* , 'à	
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		<b>&gt;</b>	3,467.			3,467.
ŀ	4	Income from investment of tax	x-exempt bond p	roceeds				
1	5	Royalties		<u> </u>				
			(i) Real	(II) Personal				• • • • • • • • • • • • • • • • • • • •
	6 a	Gross rents						
	b	Less: rental expenses				**'^ ?\$*.		
I	С	Rental income or (loss)				4220		
	d	Net rental income or (loss)		<u> </u>				
	7 a	Gross amount from sales of	(i) Securities	(II) Other		, 2.13	***	* 4, ,
		assets other than inventory		3,438.	<i>;</i> → ,	* 3		· #
	b	Less: cost or other basis			1 3 3	( 4 )		, Ř
		and sales expenses		0.		3 /		34
	С	Gain or (loss)	:	3,438.		<u>,                                    </u>	* ( },, <	
	d	l Net gaın or (loss)			3,438.			3,438.
획	8 a	Gross income from fundraisin	g events (not		**.	· , ,	1994	j <sub>n</sub>
enne		including \$	of			* · ,		և
		contributions reported on line	1c). See		* * *	, s		,
e l		Part IV, line 18	а		, ,			
Other Re	b	Less: direct expenses	b		,` "	* *		ξ, ( 
Ĭ		Net income or (loss) from fund				* *		
	9 a	Gross income from gaming ac	ctivities. See		* .	,	3:230	ν,, ,
		Part IV, line 19	<sub>.</sub> a		1 4 A	4		
		Less: direct expenses	b		` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	, ,		*`
		Net income or (loss) from gam	=					
	10 a	Gross sales of inventory, less	returns					
		and allowances	а		1			
	b	Less: cost of goods sold	b		<u> </u>			
	С	Net income or (loss) from sale		<u> </u>				
		Miscellaneous Revenu	ıe	Business Code		, ,,,,,,,	- A A K 200	
	11 a	OTHER INCOME		900099	78.		<u></u>	78.
]	b	·						
	C	; <u></u>		_				
ł	d		-					
		Total. Add lines 11a-11d		<b>&gt;</b>	78.	0 444 555		
33200	12 9	Total revenue. See instructions.		<u> </u>	5,098,240.	<b>2,444,698.</b>	73,108.	6,983.
10.20	12							Form QQA (2012)

Form 990 (2013) USTA TEXAS SECTION
Part IX | Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	mplete column (A)	
	Check if Schedule O contains a respon			(8)	
	oot include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				*
	organizations in the United States. See Part IV, line 21	87,434.	87,434.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	168,151.	168,151.		
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				<b>**</b> *
5	Compensation of current officers, directors,	110 510	440 400	25 252	
	trustees, and key employees	148,540.	112,488.	36,052.	<del></del>
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 200 240	1 017 000	200 200	<del> </del>
7	Other salaries and wages	1,320,348.	1,017,988.	302,360.	
8	Pension plan accruals and contributions (include	F2 F04	41 201	10 072	
	section 401(k) and 403(b) employer contributions)	53,594.	41,321. 183,174.	12,273. 54,406.	
9	Other employee benefits	237,580.	183,1/4.	54,406.	
10	Payroll taxes	117,602.	90,671.	26,931.	
11	Fees for services (non-employees):				
а	Management _	2 (22		2 (22	-
b	Legal	2,623.		2,623.	
С	Accounting	11,255.		11,255.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	4,244.		4,244.	
f	Investment management fees	4,244.		4,244.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	37,782.	37,782.		
12	Advertising and promotion	81,061.	30,458.	50,603.	
13	Office expenses	8,352.	30,430.	8,352.	
14	Information technology	0,332.		0,332.	
15	Royalties	112,043.	89,634.	22,409.	
16 17	Occupancy	25,943.	7,318.	18,625.	
18	Travel Payments of travel or entertainment expenses	20,7100	.,5201	20,0231	
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	284,743.		284,743.	
20	Interest	11,474.	9,179.	2,295.	
21	Payments to affiliates	•			· · · - · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization	44,384.	35,507.	8,877.	
23	Insurance	10,485.	-	10,485.	
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 0.)				
а	COMPETITIVE TENNIS	2,037,533.	2,019,155.	18,378.	
b	PUBLICATIONS	137,808.	137,808.	,	<u> </u>
c	COMMUNITY DEVELOPMENT	93,143.	93,143.		
d	MISCELLANEOUS	25,613.	<u> </u>	25,613.	
	All other expenses	3,807.	2,935.	872.	<u> </u>
25	Total functional expenses. Add lines 1 through 24e	5,065,542.	4,164,146.	901,396.	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 or note to any line in this Part X (A) (B) Beginning of year End of year 74,400. 22,876. Cash - non-interest-bearing 15,334. 11,516. 2 Savings and temporary cash investments 2 3 3 Pledges and grants receivable, net 142,745. 159,824. 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 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 instr). Complete Part II of Sch L 6 7 7 Notes and loans receivable, net 8 Inventories for sale or use 6,894. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 1,238,573 basis. Complete Part VI of Schedule D 10a 911,789. 326,784 940,827. b Less: accumulated depreciation 10b 10c Investments · publicly traded securities 11 11 2,087,366. 2,251,809. 12 12 Investments - other securities. See Part IV, line 11 13 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets 15 Other assets. See Part IV, line 11 15 3,357,814. 3,267,566. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 147,529. 216,477. 17 17 Accounts payable and accrued expenses 18 Grants payable 18 6,175. 3,961. 19 Deferred revenue 19 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons. 22 Complete Part II of Schedule L 357,079. 67,894. Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 0 105,364. Schedule D 510,783. 393,696. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 2,964,118. 2,756,783. 27 27 Unrestricted net assets 28 Temporarily restricted net assets 28 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 2,756,783. 2,964,118. 33 33 Total net assets or fund balances 3,267,566. 3,357,814. Total liabilities and net assets/fund balances

	.990 (2013) USTA TEXAS SECTION	74-218	2392	_Pa	ge 12
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<b></b>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,09		
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,06		
3	Revenue less expenses. Subtract line 2 from line 1	3		2,6	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,75		
5	Net unrealized gains (losses) on investments	5	27	2,4	<u>85.</u>
6	Donated services and use of facilities .	6			
7	Investment expenses	7			
8	Pnor period adjustments	8	- 9	7,8	<u>48.</u>
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	2,96	4,1	<u> 18.</u>
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		-		<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990: Lash Accrual Cash 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		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewer	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
þ	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basıs,			
	consolidated basis, or both:			i	
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			ا
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			,
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
		<del></del> -	Form	990	(2013)

## **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **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.

OMB No 1545-0047

Open to Public Inspection

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nan	ne of organization			Empl	oyer identification number
_		XAS SECTION			74-2182392
Pa	art I-A Complete if the org	ganization is exempt und	er section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organize Political expenditures Volunteer hours	zation's direct and indirect politic	al campaign activities ii		
Pa	art I-B Complete if the org	ganization is exempt und	er section 501(c)(	3).	<del></del>
	Enter the amount of any excise tax			<b>▶</b> \$	·
	Enter the amount of any excise tax	, ,		<b>▶</b> \$	
3	If the organization incurred a section	in 4955 tax, did it file Form 4720	for this year?		Yes No
48	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
P	art I-C Complete if the orc	ganization is exempt und	er section 501(c),	<u> </u>	
	Enter the amount directly expended	, ,	•	•	
2	Enter the amount of the filing organ	ization's funds contributed to ot	ner organizations for se	ction 527	
_	exempt function activities			. ▶\$	
3	Total exempt function expenditures	<b>.</b> .			
	line 17b	. 1400 BOL for this year?		<b>▶</b> \$	
5	Did the filing organization file Form Enter the names, addresses and er		N) of all acetion E27 no	rtical arganizations to inhina	Yes No
•	made payments. For each organiza				
	contributions received that were pr				
	political action committee (PAC). If				- <del>-</del>
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
		<u></u>			

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

Schedule C (Form 990 or 990-EZ) 2013

LHA

Schedule C (Form 990 or 990-EZ) 2013					74-2	182392 Page 2
Part II-A Complete if the org			npt under secti	on 501(c)(3) and fil	led Form 5768	
(election under sec						
				ın Part IV each affiliated	l group member's nam	e, address, EIN,
expenses, and shar		, ,	•			
B Check 🕨 📖 if the filing organizat	ion check	ed box A ar	nd "limited control" p	rovisions apply.	,	
Limit	s on Lobi	oying Expe	nditures		(a) Filing	(b) Affiliated group
			ints paid or incurre	d.)	organization's totals	totals
	_	-			- Totalo	
1a Total lobbying expenditures to influ						
b Total lobbying expenditures to influ		_	dy (direct lobbying)			
c Total lobbying expenditures (add li		d 1b)				
d Other exempt purpose expenditure		-				
e Total exempt purpose expenditure	•		•			
f Lobbying nontaxable amount. Ente						
If the amount on line 1e, column (a) o	r (b) is:		bying nontaxable a		4 3 4 4 4 4 4	, ,
Not over \$500,000			the amount on line 1		, ,	
Over \$500,000 but not over \$1,000	,000	\$100,00	0 plus 15% of the e	xcess over \$500,000.	*	, , , , , , , , ,
Over \$1,000,000 but not over \$1,5	1	\$175,00	0 plus 10% of the e	xcess over \$1,000,000	'\$ '	(
Over \$1,500,000 but not over \$17,	000,000	\$225,00	0 plus 5% of the exe	cess over \$1,500,000.		4
Over \$17,000,000		\$1,000,0	000.			
					, , , , ,	11.1
g Grassroots nontaxable amount (en		-				
h Subtract line 1g from line 1a. If zero	o or less, e	enter -0-				
i Subtract line 1f from line 1c. If zero	or less, e	nter -0-				<u> </u>
j If there is an amount other than ze	ro on eithe	er line 1h or	line 1, did the organ	ization file Form 4720	-	
reporting section 4911 tax for this	year?					<u> Yes                                   </u>
(0	_41 41		eraging Period Unde	• •		
, , ,			• •	on do not have to com nes 2a through 2f on pa		
					age 4.)	
	LODE	ying Exper	naitures During 4-1	ear Averaging Period	т	r
Calendar year	(a)	2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) Total
(or fiscal year beginning in)	(ω)	2010	(5) 2011	(0, 2012	(4) 2010	(c) rotal
2a Lobbying nontaxable amount						
b Lobbying ceiling amount			<u>.                                    </u>	* * /	, ,	
(150% of line 2a, column(e))					-5, 5 m 1 A 5	
(10070 of line Ed, coldifin(c))		··		<u> </u>		
c Total lobbying expenditures						
C Total loopying expenditures	*****			<del>                                     </del>	-	<del> </del>
d Grassroots nontaxable amount						
e Grassroots ceiling amount	·	<del> </del>		<del>                                     </del>	· · · ›	
(150% of line 2d, column (e))					( ) * )	
(-)		· · · · · · · · · · · · · · · · · · ·				
f Grassroots lobbying expenditures						

# Schedule C (Form 990 or 990-EZ) 2013 USTA TEXAS SECTION 74-2182392 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.  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: a 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? e 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? i 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)?	(a)	No	Amc	
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a 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?  e 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?  i Other activities?  j Total. Add lines 1c through 1i				,
or referendum, through the use of:  a 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?  e 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?  i Other activities?  j Total. Add lines 1c through 1i				,
a 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?  e 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?  i Other activities?  j Total. Add lines 1c through 1i				•
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?  e 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?  i Other activities?  j Total. Add lines 1c through 1i				•
c Media advertisements? d Mailings to members, legislators, or the public? e 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? i Other activities? j Total. Add lines 1c through 1i				
d Mailings to members, legislators, or the public? e 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 Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i				
e 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?  i Other activities?  j Total. Add lines 1c through 1i				
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?  i Other activities?  j Total. Add lines 1c through 1i				
g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total. Add lines 1c through 1i				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total. Add lines 1c through 1i				
i Other activities? j Total. Add lines 1c through 1i	$\Box$			
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		Ī		
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 5	01(c)(	5), or se	ction	
501(c)(6).		•		
		I	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	Х	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		Х
answered "Yes."  1 Dues, assessments and similar amounts from members		11		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
b canyover nominast year				·
		<del></del>		·
c Total	-	2c		
<ul> <li>Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> </ul>	-	<del></del>		
<ul> <li>Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess</li> </ul>	al	2c		
<ul> <li>Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic</li> </ul>	al	2c 3		
<ul> <li>Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess</li> </ul>	al	2c		

### **SCHEDULE D**

(Form 990)

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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

USTA TEXAS SECTION

**Employer identification number** 74-2182392

Pai			or Accounts.Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	le 6. (a) Donor advised funds	(h) Funda and other asserts
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	<del></del>	
2	Aggregate contributions to (during year)	<u></u>	
3	Aggregate grants from (during year)	<del></del>	
4	Aggregate value at end of year	<u></u>	
5	Did the organization inform all donors and donor advisors in	· ·	
	are the organization's property, subject to the organization's		L Yes L No
6	Did the organization inform all grantees, donors, and donor a	<u> </u>	•
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	
D	impermissible private benefit?		Yes No
Pa			art IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or	education)	toncally important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements	2b	
С	Number of conservation easements on a certified historic st	2c	
d	Number of conservation easements included in (c) acquired	ure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	asement is located	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements		└ Yes
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and	-	<del> </del>
8	Does each conservation easement reported on line 2(d) about	ive satisfy the requirements of section 170	
_	and section 170(h)(4)(B)(ii)?		└── Yes
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes	the organization's accounting for
Da	t III   Organizations Maintaining Collections of	Art Historical Transcers on O	than Cimilan Assata
Га			ther Similar Assets.
	Complete if the organization answered "Yes" to Form		<del></del>
ıa	If the organization elected, as permitted under SFAS 116 (A	•	•
	historical treasures, or other similar assets held for public ex		nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that described		
b	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of pul	blic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>\$</b>
	(ii) Assets included in Form 990, Part X	-	<b>▶</b> \$
2	If the organization received or held works of art, historical tre	•	l gain, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:	
	Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
b	Assets included in Form 990, Part X		<b>▶</b> \$

		XAS SECTIO				011	<u> </u>	74-21			ge <b>2</b>
3	Using the organization's acquisition, access	ion, and other record	ds, chec	k any of the	following that	at are a s	ignificant	use of its	collection	items	3
	(check all that apply):		_								
а	Public exhibition	d	· 🖳	Loan or exc	hange progr	ams					
b	Scholarly research	e	. []	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	in how th	ney further t	he organızat	ion's exe	mpt purp	ose in Par	t XIII.		
5	During the year, did the organization solicit of	or receive donations	of art, h	istorical trea	sures, or oth	er sımıla	r assets		_		
	to be sold to raise funds rather than to be m					-			Yes		No
Pai	t IV Escrow and Custodial Arran		ete ıf the	organizatio	n answered	"Yes" to	Form 990	), Part IV,	line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other as	ssets not	included		<b>-</b>	_	1
	on Form 990, Part X?								<b>⊻</b> Yes	Ш	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:				_		_	
									Amount		
С	Beginning balance					-	1c				
d	d Additions during the year										
е	ů ,										
f	gg								_		
2a	2a Did the organization include an amount on Form 990, Part X, line 21?								Yes	$\sqsubseteq$	No
$\overline{}$	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.										
Pai	t V   Endowment Funds. Complete	if the organization ar	swered	"Yes" to Fo							
		(a) Current year	(b) F	nor year	(c) Two yea	rs back	(d) Three	years back	(e) Four	years t	oack_
1a	Beginning of year balance				ļ		·				
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs		<u></u>							_	
f	Administrative expenses						-				
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Temporarily restricted endowment ▶	%									
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%.									
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	ınd admınıste	ered for t	he organı	zation			
	by:								`	Yes	No
	(i) unrelated organizations			-	-				3a(i)		
	(ii) related organizations					-			3a(ii)		
b	If "Yes" to 3a(II), are the related organization	s listed as required o	on Sched	dule R?					3b		
4	Describe in Part XIII the intended uses of the		owment	funds.							
Pai	rt VI  Land, Buildings, and Equipn	nent.									
	Complete if the organization answere	d "Yes" to Form 990	), Part IV	/, line 11a. S	ee Form 990	, Part X,	lıne 10.				
	Description of property	(a) Cost or c		1 ''	or other	(c) A	ccumulat	ed	(d) Book	value	
		basis (investr	ment)		(other)	de	preciation				
1a	Land				0,000.				200		
b	Buildings				0,840.		184,6		636		
С	Leasehold improvements				3,480.		38,0			, 42	
d	Equipment				9,523.		89,3		30	, 21	
	Other			1	4,730.		14,7	30.			0.
Tota	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colur	nn (B), line 1	10(c).)				911	.,78	39 <del>.</del>

Schedule D (Form 990) 2013 USTA TEXAS	SECTION		74	-2182392 Page
Part VII Investments - Other Securities.			-	
Complete if the organization answered "Yes"		11b. See Form 990, P	art X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val	luation: Cost or end	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				_
(3) Other				
(A) MUTUAL FUNDS	2,251,809.	END-OF-YE	AR MARKET	VALUE
(B)				
(C)				
(D)		:		
(E)				
(F)				-· ·
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	2,251,809.		,	
Part VIII Investments - Program Related.		<del></del>		
Complete if the organization answered "Yes"	to Form 990, Part IV, line	11c See Form 990, Pa	art X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of val	luation: Cost or en	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				<del>, , ,</del>
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶	<u> </u>		* %	
Part IX Other Assets.				
Complete if the organization answered "Yes"		11d. See Form 990, P	art X, line 15.	Y
	Description			(b) Book value
(1)				
(2)	<del></del>			
(3)				<u> </u>
(4)				
(5)				
(6)		-		
(8)	<del></del>			
(9)	45.)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	ne 15.)	<del></del>	<u> </u>	
	# - F 000 P-+ N/ h	44446.0	000 D .V.I. 05	
Complete if the organization answered "Yes  (a) Description of liability		(b) Book value	990, Part X, line 25	·
<u> </u>		(b) Book value	" (* ¾ ;	4
(1) Federal income taxes (2) DEFERRED COMPENSATION PAY	ZARI.E	105,364.	n Yn ai Mele ko	•
	TADDE	103,304.		
(3)				,
(4)				
(5)				***
(6)	-			**
(7)				
(8)				

105,364.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

<sup>2.</sup> Liability for uncertain tax positions. 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 X

lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

EXPLANATION: THE MOST SIGNIFICANT TAX POSITIONS OF USTA TEXAS ARE ITS DETERMINATIONS OF WHETHER ANY AMOUNTS ARE SUBJECT TO UNRELATED BUSINESS INCOME TAX (UBIT). USTA TEXAS HAS ADVERTISING INCOME DURING THE YEAR AND THE IRS CONSIDERS THIS "BUSINESS INCOME" UNRELATED TO USTA TEXAS' EXEMPT STATUS. A PORTION OF THE PROFIT FROM THESE ACTIVITIES IS SUBJECT TO FEDERAL INCOME TAXES; HOWEVER, USTA TEXAS HAD DEDUCTIONS IN EXCESS OF INCOME FOR THESE ACTIVITIES DURING THE YEAR ENDED DECEMBER 31, 2013. THUS, NO PROVISION HAS BEEN INCLUDED IN THESE COMBINED FINANCIAL STATEMENTS FOR ANY FEDERAL INCOME TAX LIABILITY THAT MAY RESULT FROM THIS REVENUE. ALL SIGNIFICANT TAX POSITIONS HAVE BEEN CONSIDERED BY MANAGEMENT AND IT HAS DETERMINED THAT IT IS MORE LIKELY THAN NOT THAT ALL TAX POSITIONS WOULD BE 332054 09-25-13 Schedule D (Form 990) 2013

Schedule D (Form 9)	90) 2013	USTA TI	EXAS	S SECTION	ON			74-2182392	Page 5
Part XIII Supp	lement	USTA TI al Information (cont	tinued,	)					
								<u> </u>	
SUSTAINED	UPON	<b>EXAMINATION</b>	BY	TAXING	AUTHOR	ITIES.			
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SCHEDULEI

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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,

Open to Public OMB No 1545-0047 Inspection

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

▶ Attach to Form 990.

Employer identification number 74-2182392X Yes 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 USTA TEXAS SECTION General Information on Grants and Assistance criteria used to award the grants or assistance? Part I

2 |

2 Describe in Part IV the organization's procedures for monitoring the use or great and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

		of (h) Purpose of grant
		(g) Description o
		(f) Method of
	ded	
	licated if additional space is needed	IRC section (d) Amount of (e) Amount of
	be duplicated if addi	(c) IRC section
	\$5,000 Part II can	(b) EIN (c) IRC
dails and Circle Assistance to Continue and Circle Assistance to Continue and Circle Assistance and Circle Ass	recipient that received more than \$5,000 Part II can be duplicated if additional space	1 (a) Name and address of organization

recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	\$5,000 Part II car	be duplicated if addit	ional space is need	led			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMARILLO AREA TENNIS ASSOCIATION 334 CACTUS DRIVE AMARILLO, TX 79118	01-0640227	501(¢)(3)	12,000.	0.			PARTNERSHIP GRANT AND QST/TMI GRANT
CAPITAL AREA TENNIS ASSOCIATION 5511 PARKCREST DRIVE, SUITE 104 AUSTIN, TX 78731	74-2038138	501(C)(3)	6,700.	0.			PARTWERSHIP GRANT
CORPUS CHRISTI TENNIS ASSOCIATION P.O. BOX 4696 CORPUS CHRISTI, TX 78469	74-6060733	501(C)(3)	10,800.	0.			PARTNERSHIP GRANT, QST/TMI GRANT, AND 10 & UNDER GRANT
DALLAS TENNIS ASSOCIATION 14679 MIDWAY RD, STE. 104 ADDISON, TX 75001	75-6020581	501(C)(3)	5,750.	.0			PARTNERSHIP GRANT
HOUSTON TENNIS ASSOCIATION 3535 BRIARPARK DRIVE, SUITE 215 HOUSTON, TX 77042	74-6061090	501(C)(3)	9,750.	.0			PARTNERSHIP GRANT, 10&U TOURNAMENT GRANT, COLLEGIATE GRANT, NJTL PLAY DAY GRANT, SENIOR
SAN ANTONIO TENNIS ASSOCIATION 1503 SAN PEDRO SAN ANTONIO. TX 78212	74-6062875	501(C)(3)	12,150.	.0			PARTNERSHIP GRANT, JTT NATIONAL TRAVEL GRANT, SUPER SENIOR MZ GRANT, SPORTS SCIENCE GRANT,
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government or	ganizations listed in th	le line 1 table				6

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2013)

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74-2182392 Page 1		(h) Purpose of grant or assistance	PARTNERSHIP GRANT, FACILITY FUNDING	JTC COMPETITIVE MATCHING GRANT	USTA TEXAS SUPPORT GRANT						Schedule I (Form 990)
	(   1	(g) Description of non-cash assistance									
	edule I (Form 990), Pa	(f) Method of valuation (book, FMV, appraisal, other)									
	nited States (Sch	(e) Amount of non-cash assistance	.0	0	0.						
	izations in the U	(d) Amount of cash grant	7,500.	10,000.	10,000.						
	vernments and Organ	(c) IRC section if applicable	501(C)(3)	501(C)(3)	501(C)(3)						
S SECTION	Assistance to Go	(b) EIN	26-1421941	74-2182394	74-2358330						
Schedule I (Form 990) USTA TEXAS	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	(a) Name and address of organization or government	SPRING BRANCH TENNIS ASSOCIATION 193 HILLTOP CIRCLE SPRING BRANCH, TX 78070	TEXAS TENNIS AND EDUCATION FOUNDATION - 8105 EXCHANGE DRIVE - AUSTIN, TX 78754	TEXAS TENNIS MUSEUM AND HALL OF FAME - 1108 S. UNIVERSITY PARKS DRIVE - WACO, TX 76707						

USTA TEXAS SECTION

Schedule | (Form 990) (2013)

USTA TEXAS SECTION

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 | 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 | Grants and Other Assistance to Individuals in the United States.

Page 2

74-2182392

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(book, FMV, appraisal, other)	(f) Description of non-cash assistance
USA SCHOOL TENNIS (A)	23	. 375.	25,691,FMV		PROGRAM EQUIPMENT
10 & UNDER/OUICK START (B)	82		22,814.	PMV	PROGRAM EQUIPMENT
JUNIOR TEAM TENNIS (C)	2	3,32		FWV	PROGRAM EQUIPMENT
ADULT RECREATION (D)	2	.0	340.	PMV	PROGRAM EQUIPMENT
TENNIS LEAGUES (F)	88	28 850	o		
Part IV   Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	quired in Part I, lir	e 2, Part III, column	(b), and any other a	dditional information.	
+					
EXPLANATION: ALL GRANTS FOLLOW THE	SAME	PROCESS UNLESS	SS OTHERWISE	SE SPECIFIED.	
APPLICATION PROCESS,	AN INDEPENDENT		COMMITTEE TO R	REVIEW THE	
APPLICATIONS AND SELECT RECEIPIENTS	rs. grant		RECEIPIENTS MUST P	PROVIDE	
ADDITIONAL PAPERWORK ON THE USE OF	FUNDS	TO THE USTA	TEXAS	SECTION.	
(B) TO RECEIVE A 10 AND UNDER/QUICKS	TART	"KIDS TENNIS	CLUB	EQUIPMENT	
GRANT", EACH APPLICANT MUST BECOME	A USTA	ORGANIZATI	ORGANIZATIONAL MEMBER	R AND	
REGISTER THEIR TENNIS PROGRAM AS AN	1	OFFICIAL KIDS TE	TENNIS CLUB.	ONCE	
CONFIRMED BY THE USTA 10 AND UNDER	R COORDINATOR,	THE	RECIPIENT	RECIPIENT WILL RECEIVE	
					Schedule I (Form 990) (2013

Schedule I (Form 990) USTA TEXAS SECTION	NOI	3 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	400 mm 21/1		74-2182392 Page 2
(a) Type of grant or assistance  (b) Nurecipied (b) Nurecipied (c) Individuals in the continuation of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	mber of (c) Amount of (d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
DIVERSITY/MULTICULTURAL PROGRAMS (G)	28.	24,155.	1,054.	FMV	PROGRAM EQUIPMENT
ADULT COMPETITIVE (H)	ť	005	0.		
SENIOR COMPETITIVE (I)	6	15,000.	.0		
SPORTS SCIENCE (J)	14.	8,081.	.0		
WHEELCHAIR (K)	, v	6,825.	.0		
COLLEGIATE (L)	13.	7,100.	.0		
ADVOCACY (M)	21.	15,090.	1,304.	FMV	PROGRAM EQUIPMENT
10 & UNDER COMPETITIVE (N)	20.	2,749.	0.		
ADAPTIVE (0)	6	0.	4,347.	FMV	PROGRAM EQUIPMENT Schedule I (Form 990)

- A STANDARD KIDS TENNIS CLUB EQUIPMENT PACKAGE FOR THEIR PROGRAM USE.
- (C) USTA'S PORTION OF A MATCHING GRANT TO THE USTA FOR TEAM TENNIS TRAVEL

  TO NATIONALS AWARDED TO THE TEAMS WINNING THE SECTIONAL TEAMS AND

  REPRESENTING TEXAS IN THE NATIONAL EVENT.
- (F) 38 QUALIFYING TEAMS RECEIVE TRAVEL STIPENDS TO BE USED TOWARD THEIR EXPENSE INCURRED IN REPRESENTING TEXAS IN NATIONAL LEAGUE PLAYOFFS.
- (H) THIS GRANT IS A SECTION SUPPORT GRANT FOR A USTA CATEGORGY 1 ADULT CHAMPIONSHIP EVENT HELD IN THE USTA TEXAS SECTION. IT IS AWARDED TO THE HOST ORGANIZATION/FACILITY WITH THE TEXAS SECTION AS AN ASSISTANCE GRANT TO OFFSET EXPENSES.
- (I) THESE GRANTS ARE SECTION SUPPORT GRANTS FOR USTA NATIONAL SENIOR/SUPER SENIOR CHAMPIONSHIPS AND SENIOR/SUPER SENIOR MAJOR ZONE EVENTS HELD IN THE USTA TEXAS SECTION. IT IS AWARDED TO THE HOST ORGANIZATION/FACILITY WITHIN THE TEXAS SECTION AS AN ASSISTANCE GRANT TO OFFSET EXPENSES. 3 GRANTS FOR HOSTING NATIONAL EVENTS AND 6 GRANTS WERE MATCHING GRANTS AWARDED TO HOST ORGANIZATIONS FOR MAJOR ZONE EVENT HOSTING.
- (J) THIS IS A MATCHING FUNDS GRANT THAT REIMBURSES THE RECIPIENTS 50% OF THE ACTUAL COST OR UP TO THE MAXIMUM OF THE AWARDED GRANT, WHICHEVER IS LESS.
- (K) FOR WHEELCHAIR SUPPORT GRANTS, A SELECTION COMMITTEE AWARDS SUPPORT

  FUNDS TO INDIVIDUAL EVENTS THAT PROVIDE SERVICES AND TENNIS PLAY

  OPPORTUNITIES TO THE WHEELCHAIR POPULATIONS WITHIN USTA TEXAS. A MEMBER OF

  THE WHEELCHAIR STAFF IS PRESENT AT EACH EVENT FOR ASSURANCE THAT THE

  FINANCIAL SUPPORT IS BENEFICIAL AND NECESSARY.
- (N) THIS GRANT WAS AWARDED TO THE HOST OF THE 10 AND UNDER/QUICK START
  COMPETITIVE TOURNAMENTS IN SUPPORT OF THE OFFERING OF THIS NEW PROGRAM

Schedule I (Form 990) USTA TEXAS SECTION  Part IV   Supplemental Information	74-2182392 Page 2
NAME OF ORGANIZATION OR GOVERNMENT: HOUSTON TENNIS ASSOCIAT	NOI
(H) PURPOSE OF GRANT OR ASSISTANCE: PARTNERSHIP GRANT, 10&U	TOURNAMENT
GRANT, COLLEGIATE GRANT, NJTL PLAY DAY GRANT, SENIOR COMPET	TITIVE MATCHING
GRANT	
NAME OF ORGANIZATION OR GOVERNMENT: SAN ANTONIO TENNIS ASSO	CIATION
(H) PURPOSE OF GRANT OR ASSISTANCE: PARTNERSHIP GRANT, JTT	NATIONAL
TRAVEL GRANT, SUPER SENIOR MZ GRANT, SPORTS SCIENCE GRANT,	COLLEGIATE
GRANT - UTSA	
	· · · · · · · · · · · · · · · · · · ·
	4

### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

2013

OMB No 1545-0047

Open to Public Inspection

Name of the organization

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

Employer identification number

USTA TEXAS SECTION 74-2182392 FORM 990, PART VI, SECTION A, LINE 6: EXPLANATION: 54,383 INDIVIDUAL MEMBERS AND 914 ORGANIZATIONAL MEMBERS. FORM 990, PART VI, SECTION A, LINE 7A: EXPLANATION: MEMBERS ELECT THE EXECUTIVE COMMITTE AT ANNUAL MEETING. FORM 990, PART VI, SECTION A, LINE 7B: EXPLANATION: AMENDMENTS TO THE CONSTITUTION MAY BE MADE BY A VOTE OF AT LEAST 2/3 OF ALL VOTES CAST BY A QUORUM OF MEMBERS. FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: THE CHAIR OF BUDGET & FINANCE COMMITTEE, AUDIT SUB-COMMITTEE OF BUDGET & FINANCE COMMITTEE, PRESIDENT AND TREASURER OF THE MANAGEMENT COMMITTEE OF THE EXECUTIVE COMMITTEE REVIEW WITH THE PREPARING CPA. IS THEN DISTRIBUTED TO THE BOARD PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: EXPLANATION: EXECUTIVE COMMITTEE MEMBERS ARE TRAINED ON CONFLICTS OF INTEREST AND ARE REQUIRED TO DISCLOSE ALL CONFLICTS. FORM 990, PART VI, SECTION B, LINE 15A: EXPLANATION: MANAGEMENT COMMITTEE IS AN INDEPENDENT BODY THAT REVIEWS AND SETS THE EXECUTIVE DIRECTOR'S COMPENSATION. FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: THE ORGANIZATIONS' GOVERNING DOCUMENTS ARE AVAILABLE ON THE

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization USTA TEXAS SECTION	Employer identification number 74-2182392
ORGANIZATION'S WEBSITE. THE ORGANIZATION'S FINANCIAL STA	TEMENTS, FORMS
990, AND 990-T ARE AVAILABLE UPON REQUEST.	
FORM 990, PART V, LINE 6A & 6B:	
EXPLANATION: THE ORGANIZATION WILL SEND NOTICES TO CONTRI	BUTORS IN THE
FUTURE STATING THAT THE PAYMENT IS NOT DEDUCTIBLE AS A CH	ARITABLE
CONTRIBUTION.	
	······································
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SCHEDULE R

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

USTA TEXAS SECTION

Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

See separate instructions.

2013

Open to Public Inspection

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

Employer identification number 74-2182392

Section 512(b)(13) controlled Schedule R (Form 990) 2013 ž entity? Direct controlling Yes × entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Direct controlling entity End-of-year assets status (if section 501(c)(3)) <u>e</u> Public charity LINE 7 **Total income** Exempt Code 9 section 501(C)(3) € Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or foreign country) foreign country) <u>ပ</u> TEXAS CHARITABLE FOUNDATION Primary activity Primary activity 9 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Ϋ́ 74-2182394, 8105 EXCHANGE DRIVE, AUSTIN, Name, address, and EIN (if applicable) TEXAS TENNIS & EDUCATION FOUNDATION Name, address, and EIN of related organization of disregarded entity Part Part II 78754

74-2182392

USTA TEXAS SECTION Schedule R (Form 990) 2013

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

	ntage rship														pe	_	7.73) 18d 9.9
(K)	Percer														e relat	E 3	
9	General or Percentage managing ownership partner?					_									e or mor	(F)	Percentage ownership
	box 5dule 1065)														had on		Perc
€	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)														cause it l	(a)	Share of end-of-year
					1					 	-				э 34 be		end S
Ξ	Disproportionate allocations?	•													rt IV, line		f total ne
_	Share of id-of-year assets														Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	3	Share of total income
(6)	Share of end-of-year assets														on Forn		corp,
	total Je								-						"Se "Yes"	(e)	Type of entity (C corp, S corp,
€	Share of total income														answere		
															ızatıon	Ð	Direct controlling entity
(e)	Predominant income (related, unrelated, cluded from tax undl sections 512-514)														ne organ		
	Predominant income (related, excluded from tax under sections 512-514)														plete if tl	(3)	Legal domicite (state or foreign
							 					-	•	•	ıst Corr		<u>F</u>
9	Direct controlling entity														n or Tru		tivity
_		_	<u>.                                      </u>		igert										ooration c year.	<u>a</u>	Primary activity
9	Legal domicile (state or foreign country)														Identification of Related Organizations Taxable as a Corporatio organizations treated as a corporation or trust during the tax year.		ď
	vity														xable a		
æ	Primary activity							1							ions Ta		
	Print														ganizat rporatio		Z c
															ited Org		Name, address, and EIN of related organization
	nd EIN zation														of Rela	(a)	address ed orga
(a)	Name, address, and EIN of related organization														cation ations		Name, of relati
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	Na of									:					Part IV		
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	يع	2 (2) 2 (2) 3 (2)		Š								
		512(b)(13) controlled		Yes						 		
	ε	Percentage ownership	•									
		Share of end-of-year										
	€	Share of total income										
	(e)	Type of entity (C corp, S corp,	or trust)									
	(p)	be Direct controlling Type of entity Struction (C corp., S corp.)										
	(၁)	Legal domicite (state or	foreign	country)								
ilig tile tax year.	(p)	Primary activity										
organizations treated as a corporation of trust during the tax year.	(a)	Name, address, and EIN of related organization										

Schedule R (Form 990) 2013

332162 09-12-13

Part V Transactions With Related Organizations Complete of the organization answered "Yes" on 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	ol
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more re	elated organizations listed	in Parts II-IV?			l
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	X	
				1b	×	-
c Gift, grant, or capital contribution from related organization(s)				10	X	
				19	×	
				4	×	١٠
<ul> <li>Loans or loan guarantees by related organization(s)</li> </ul>				2	+	.
f Dividends from related organization(s)				14	X	
c Sale of assets to related organization(s)				19	X	
				÷	×	۱
				Ŧ	×	١
Exchange of assets with related organization(s)				ij	×	. I.
					<b>\</b>	
K Lease of facilities, equipment, or other assets from related organization(s)				¥	<b>()</b>	ıl.
l Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=	×	ا ہ
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			<b>1</b>	× -	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			t	×	ا ہا
Sharing of paid amplyings with related organization(s)				ş	×	١
					•	Ι.
<ul> <li>Peimbursement paid to related organization(s) for expenses</li> </ul>				<b>-</b>	4	٦l
				10	×	ا ہ
r Other transfer of cash or property to related organization(s)				+	<u>×</u>	
				2	×	1
If the answer to any of the above is "Yes." see the instructions for	who must complete the	is line, including covered	information on who must complete this line, including covered relationships and transaction thresholds.			l
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(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	/olved		
(1) TEXAS TENNIS & EDUCATION FOUNDATION	В	10,000.ACTUAL	ACTUAL CASH			
(2)						
(3)		-				
(4)						
(5)						
(9)						
202152 00.19.19			Schodulo R (Form 990) 2013	(Form	000 201	I۳

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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.

(K)	sentage nership																				0) 2013
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(i) Code V-1181	amount in box 20 managing ownership of Schedule K-1 partner?	(Form 1065)			 		•														Schedule R (Form 990) 2013
ε	Urspropor- tionate allocations?	Yes No		 _			_		L				_			$\downarrow$		$oldsymbol{ol}}}}}}}}}}}}}}$			
	alloc to	ĕ	 	 4	 				┡		 <u> </u>	 	$\dashv$			4	 	 $\downarrow$	 	_	
(a)	Share of end-of-year	assets												_	 ,						
(j)	Share of total	Income																			
@ @ @	partners sec 501(c)(3) orgs?	Yes No			 				L	 	_					1		İ			
	501 501	) Yes							L				4			$\downarrow$		╄	 		
(p)	redominant income pa (related, unrelated, excluded from tax	under section 512-514																			
(0)	ig je	country)																			
(q)	Primary activity																				
(a) (b) (c) (d)	Name, address, and EIN of entity																				

Schedule F	R (Form 990) 2013	USTA	TEXAS	SECTION			74-2182392	Page 5
Part VII	R (Form 990) 2013  Supplemental Info	rmation						
	Provide additional inform	mation for res	sponses to d	uestions on Sch	nedule R (see instri	uctions).		
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Form **8868** (Rev. January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www irs gov/form8868 .

OMB No. 1545-1709

						_
• If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	ert I and check this box		<b>•</b>	X
• If you	are filing for an <mark>Additional (Not Automatic) 3-Month E</mark> x	tension, c	complete only Part II (on page 2 of	this form).		
Do not c	omplete Part II unless you have already been granted	an automa	itic 3-month extension on a previous	sly filed For	m 8868.	
	ic filing (e-file). You can electronically file Form 8868 if	you need a	a 3-month automatic extension of tir	ne to file (6	months for a corp	oration
	to file Form 990-T), or an additional (not automatic) 3-mo					
of time to	ofile any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers A	Associated With Co	ertain
Personal	Benefit Contracts, which must be sent to the IRS in page	er format	(see instructions). For more details	on the elec	tronic filing of this	form,
visit www	virs.gov/efile and click on e-file for Charities & Nonprofits	<b>3.</b>	,		J	·
Part I	Automatic 3-Month Extension of Time		submit original (no copies nee	eded).		
	ation required to file Form 990-T and requesting an auto					
Part I on				•	<b>&gt;</b>	• <u> </u>
	, corporations (including 1120-C filers), partnerships, REN	IICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time	
	ome tax returns.	•	•		r's identifying nu	mber
Type or	Name of exempt organization or other filer, see instru	ictions.			identification num	
print				, ,		, , , , , , , , , , , , , , , , , , , ,
File by the	USTA TEXAS SECTION				74-21823	92
due date for filing your return See	Number, street, and room or suite no. If a P.O. box, s 8105 EXCHANGE DRIVE	ee instruc	tions.	Social sec	curity number (SSI	۷)
instructions	City, town or post office, state, and ZIP code. For a factor AUSTIN, TX 78754	oreign add	lress, see instructions.			
	1110011111, 1111 / 0.101					
Enter the	Return code for the return that this application is for (fil	e a separa	te application for each return)			0 1
Applicat	ion	Return	Application			Return
Is For		Code	is For			Code
	0 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 99		02	Form 1041-A			08
	20 (ındıvidual)	03	Form 4720 (other than individual)	<del></del>		09
Form 99		04	Form 5227			10
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069		· <del></del>	11
	0-T (trust other than above)	06	Form 8870			12
	KEN MCALLISTER	1 00				
• The b	ooks are in the care of > 8105 EXCHANGE	DRIVE	- AUSTIN, TX 7875	4		
	hone No. ► 512-443-1334		Fax No. ▶			
	organization does not have an office or place of busines	s in the Ur				• 🗆
	is for a Group Return, enter the organization's four digit		•	If this is for	the whole group,	check this
box 🕨	. If it is for part of the group, check this box	7 ·	ach a list with the names and EINs o		•	
	equest an automatic 3-month (6 months for a corporation					
		•	tion return for the organization name		The extension	
	for the organization's return for:  \tilde{X} calendar year 2013 or					
<b>&gt;</b>	tax year beginning	, an	id ending			
					_	
2 If t	he tax year entered in line 1 is for less than 12 months, o	check reas	on: Initial return	Fınal retun	n	
	Change in accounting period			<del></del>		
	his application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any			•
_	nrefundable credits. See instructions.			3a	\$	<u> </u>
	his application is for Forms 990-PF, 990-T, 4720, or 6069		-			^
	timated tax payments made. Include any prior year over			3b	\$	0.
	lance due. Subtract line 3b from line 3a. Include your pa	-			•	0
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.
Caution	. If you are going to make an electronic funds withdrawa	ı (airect de	idit) with this Form 8868, see Form 8	3453∙EU ar	1a Form 8879-EO f	or payment