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SCANNED MAY 0 6 ZUIA

Department of the Treasury Internal Revenue Service

**Return of Organization Exempt From Income Tax** 

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

OMB No 1545-0047

Open to Public Inspection

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

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

A F	or the	e 2013 calendar year, or tax year beginning and	ending	
В	Check if	C Name of organization UNITED STATES TENNIS ASSOCIATION/PACI	FIC	D Employer identification number
	Addre	SS NORMINIEGE GEOMEON		
F	Name chang			93-0853818
$\vdash$	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/sui	
F	Termir		300	(503) 520-1877
$\vdash$	_ated Amend	ded 0	10 0 0	G Gross receipts \$ 2,457,147.
	_lreturn _\Applic			H(a) Is this a group return
۰	⊥tión pendir			for subordinates? Yes X No
		SAME AS C ABOVE		H(b) Are all subordinates included? Yes No
		empt status. X 501(c)(3) 501(c) ( )	or 5	27 If "No," attach a list (see instructions)
11	Nehsit	te: WWW.USTA.COM/PNW		H(c) Group exemption number ▶
		organization: X Corporation Trust Association Other	L Ye	ar of formation: 1977 M State of legal domicile: OR
_	art I	Summary	<del>_</del>	
		Briefly describe the organization's mission or most significant activities.	SCHEL	OULE O
Governance	l '			
naı	2	Check this box If the organization discontinued its operations or disposit	osed of mo	ore than 25% of its net assets
Ş.	l	Number of voting members of the governing body (Part VI, line 1a)		3  8
Ğ	l	Number of independent voting members of the governing body (Part VI, line 1b)		4 8
Activities &	l .	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5 87
ıtıe	l	Total number of volunteers (estimate if necessary)		6 250
cţ	l	Total unrelated business revenue from Part VIII, column (C), line 12		7a 0.
⋖	l	Net unrelated business taxable income from Form 990-T, line 34		7b 0.
				Prior Year Current Year
ø)	8	Contributions and grants (Part VIII, line 1h)		1,293,350. 1,318,238.
ű	1	Program service revenue (Part VIII, line 2g)		924,367. 998,668.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		129,013. 104,308.
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		36,067. 35,933.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,382,797. 2,457,147.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		75,578. 47,400.
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0. 0.
Ş	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		998,472. 1,107,882.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.
cbe	b	Total fundraising expenses (Part IX, column (D), line 25)	0.	
ω		Other expenses (Part IX, column (A), lines 1/1a-1/1d, 114-24e)		766,856. 866,705.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,840,906. 2,021,987.
	19	Revenue less expenses Subtract line 18 from line 12 R 2 4 2014		541,891. 435,160.
Net Assets or Fund Balances				Beginning of Current Year End of Year
sets	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	L	5,649,918. 6,713,788.
t As	21	Total liabilities (Part X, line 26)		364,817. 374,938.
캺	22	Net assets or fund balances Subtract line 21 from line 20		5,285,101. 6,338,850.
Pa	art II	Signature Block		
		ilties of perjury, I declare that I have examined this return, including accompanying schedul		
true	, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of w	vhich prepa	rer has any knowledge.
		Lawre Vi		9/19/19
Sig	n	Signature of officer		Date
Her	e	MATTHEW WARREN, EXECUTIVE DIRECTOR		
		Type or print name and title		L Poto
		Print/Type preparer's name Preparer's rignature		Date Check PTIN
Paid	į	YEE LEE LO		4/8/14-employed P01294356
	parer	Firm's name GARY MCGEE & CO. LLP		/ Firm's EIN ▶
Use	Only	Firm's address 808 S.W. THIRD AVENUE, SUITE 70	0	/502\ 222 2515
	_	PORTLAND, OR 97204		Phone no. (503) 222-2515
May	the II	RS discuss this return with the preparer shown above? (see instructions)		Yes No
3320	01 10-2	9-13 LHA For Paperwork Reduction Act Notice, see the separate instruct	ions.	Form <b>990</b> (2013)

Pai	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
•	TO PROMOTE THE GROWTH OF TENNIS THROUGH ENGAGING CHILDREN, ADULTS, AND
	FAMILIES IN EVERY NEIGHBORHOOD.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	(Code ) (Expenses \$ 535,482. including grants of \$ 4,997.) (Revenue \$ 567,082.)
	ADULT COMPETITION - PROVIDES YEAR-ROUND COMPETITIVE TOURNAMENTS AND
	LEAGUE PLAY FOR ADULTS AND SENIORS AS WELL AS SOCIAL EVENTS AND MATCH PLAY FOR LOCAL NEIGHBORHOODS, REGARDLESS OF RACE, GENDER, OR
	SOCIO-ECONOMIC LEVEL. IN MANY CASES, THE UNITED STATES TENNIS
	ASSOCIATION PACIFIC NORTHWEST SECTION ("USTA/PNW") SUPPLIES LOANER
	TENNIS EQUIPMENT AND THE VENUE FOR PARTICIPANTS TO GET FIT AND STAY
	HEALTHY THROUGH THE LIFELONG SPORT OF TENNIS. THE USTA/PNW CONTINUALLY
	LOOKS TO PARTNER WITH PRIVATE AND PUBLIC ORGANIZATIONS IN ORDER TO GIVE
	BACK AND TO IMPROVE FACILITIES AT PARKS, SCHOOLS, AND OTHER COMMUNITY
	LOCATIONS. PARTICIPANTS ARE INVITED TO SUPPLEMENT COMPETITION THROUGH
	VOLUNTEER OPPORTUNITIES AT YOUTH AND TEEN RECREATIONAL PROGRAMS.
4b	(Code) (Expenses \$348,318. including grants of \$14,800. ) (Revenue \$)
	COMMUNITY TENNIS AND PARTNERSHIPS - STRENGTHENS COMMUNITIES THROUGH
	PARTNERSHIPS AND THROUGH SUPPORT OF EXISTING PROVIDERS AT THE LOCAL,
	REGIONAL, AND STATE LEVEL THAT, IN TURN, FACILITATE PROGRAMS THAT PROMOTE HEALTH AND WELLNESS, SOCIAL/EMOTIONAL WELL-BEING, AND ACADEMIC
	ENRICHMENT. PARTNERS AND PROVIDERS HAVE ACCESS TO USTA/PNW PROGRAMS
	THAT INCLUDE FREE LOANER EQUIPMENT, STANDARDIZED CURRICULA, AND FREE OR
	LOW-COST INSTRUCTION FOR ALL AGES, WITH A FOCUS ON UNDERSERVED YOUTH.
	THE USTA/PNW PROVIDES ADDITIONAL SUPPORT THROUGH SCHOLARSHIPS AND
	GRANTS, FACILITY ASSISTANCE, STANDARDIZED TRAININGS, AND MORE.
4c	(Code ) (Expenses \$ 219,913. including grants of \$ 4,375.) (Revenue \$ 336,331.)
	MARKETING AND OUTREACH - PROMOTES AND INCREASES AWARENESS ABOUT THE
	BENEFITS OF TENNIS ACROSS ALL SOCIO-ECONOMIC LEVELS AND ENCOURAGES
	INDIVIDUALS TO ENGAGE IN THE LIFELONG SPORT OF TENNIS. OUTREACH
	EFFORTS SEEK TO EDUCATE AND ACTIVATE STAKEHOLDERS ON MULTIPLE PLATFORMS INCLUDING: SCHOOLS, COLLEGES/UNIVERSITIES, COMMUNITY CENTERS, PRIVATE
	AND PUBLIC CLUBS, AS WELL AS GOVERNMENT ENTITIES SUCH AS PARKS AND
	RECREATION. AS A MISSION-DRIVEN ORGANIZATION, THE USTA/PNW PROMOTES
	DIVERSITY AND INCLUSION AT ALL LEVELS AND, THROUGH ITS YOUTH PROGRAMS,
	CAMPAIGNS TO TIE TENNIS TO CHARACTER DEVELOPMENT AND EDUCATIONAL
	OPPORTUNITIES.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 352,567 • Including grants of \$ 23,228 •) (Revenue \$ 95,255 •)
4e	Total program service expenses ► 1,456,280.
	Form <b>990</b> (2013)

Form 990 (2013) NORTHWEST SECTION
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		X
	public office? If "Yes," complete Schedule C, Part I	_3_		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	١.		$ _{\mathbf{x}}$
_	during the tax year? If "Yes," complete Schedule C, Part II	4_		<u> </u>
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		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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			
	Schedule D, Part III	_8		X
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?			٧,
	If "Yes," complete Schedule D, Part IV	9_	_	<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			v
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
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			
9	as applicable  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	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		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			Х
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
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	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	ıza	<del></del> -	
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			_
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		_X_
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		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
4 <b>-</b>	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	_16		<u>X</u>
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	47		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17	-	
.5	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<del></del>
	complete Schedule G, Part III	19	[	Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Earm	aan /	2013\

93-0853818 Page 4

Form 990 (2013) NORTHWEST 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	ŀ		
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	ļ
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 27 If "Yes," complete Schedule I, Parts I and III	22	Х	
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		X
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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
h	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		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		Χ_
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			
	instructions for applicable filing thresholds, conditions, and exceptions):			37
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		$\frac{x}{x}$
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		l	
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			17
	Part V, line 1	34		$\frac{x}{x}$
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
a	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		
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		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	.		v
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37_		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	х	
	Note. All Form 990 filers are required to complete Schedule O			2013)
		1 UIIII		ムひょうし

Page 5

Form	1990 (2013) NORTHWEST SECTION 93-0853	818	Р	age 5
	rt 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 1b 0			1
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1	ļ	
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 87			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990 T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5с		
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_		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<u> </u>
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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		х
	to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year 7d	7¢		
	If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	<del></del>
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A			
-	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?  N/A	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders N/A 11a			l
b	Gross income from other sources (Do not net amounts due or paid to other sources against			l
	amounts due or received from them.)			l
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			——
а	is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	ĺ	ľ	
	Enter the amount of reserves on hand	44-		X
	Did the organization receive any payments for indoor tanning services during the tax year?  If "Nos" has it filed a Farm 720 to report these payments? If "No " provide an explanation in Schoolule O.	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

# UNITED STATES TENNIS ASSOCIATION/PACIFIC

Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to changes in Schedule O See instructions

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	]		
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code )			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶OR			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and	ıvaılab	le	
	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, conflict of interest policy, an	d finar	icial	
	statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion 🕨	·	
	MATTHEW WARREN - (503) 520-1877			
_	4840 S.W. WESTERN AVENUE, SUITE 300, BEAVERTON, OR 97005-3430			

# NORTHWEST SECTION

93-0853818

# Form 990 (2013) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

# Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization. more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(2) ALLEN CLENDANIEL  EXECUTIVE VICE PRESIDENT  (3) MARK LERFALD  2.00  X  0.  0.  0.	Check this box if neither the organization in	nor any related	orga	anıza	ation	co	mpe	nsat	ted any current officer, o	director, or trustee	
Compensation from related organizations below line)   Testinate organizations of the compensation from related organizations below line)   Testinate organizations of the compensation from related organizations below line)   Testinate organizations of the compensation from related organizations (W.2/1099-MISC)   W.2/1099-MISC)   W.2/109-MISC)   W.2/109-MISC)   W.2/109-MISC)   W.2/109-MISC)   W	(A)	(B)							(D)	(E)	(F)
Dours per   Week   (itst any hours for related organizations below line)   Tokk washington   Tokk wa	Name and Title	Average	(do	Position (do not check more than one			than	one	Reportable	Reportable	Estimated
(list any hours for related organizations below line)  (1) NORWARD J. "BILL" BROOKS JR. 2.00  VP OF NW WASHINGTON  (2) ALLEN CLENDANIEL  EXECUTIVE VICE PRESIDENT  (3) MARK LEFFALD  VP OF SOUTHERN OREGON  (4) ANTHONY MENKE  SECTION DELEGATE  VP OF RAWLSKY  VP OF PASTERN WASHINGTON  (6) JEFF YARNE  VP OF NORTHERN OREGON  (7) MIKE TEMPLE  PRESIDENT  X X X X X X X X X X X X X X X X X X X		1 '	box	box, unless person is both an			is bot	h an	*	,	
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(2) ALLEN CLENDANIEL       2.00         EXECUTIVE VICE PRESIDENT       X       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	(1) NORWARD J. "BILL" BROOKS JR.	2.00				Ī				-	
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Section B. Independent Contractors  (A)  Name and business address  NONE  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Ye			not limited to th	1056	liste	ed al	nove	=) wh	10 r		000 of reportab				<u> </u>
Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  NONE  Description of services  Compensation  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization.   1 Otal number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization.   1 Otal number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization.   2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization.   2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization.	_		not imited to ti	1030	iiste	,u u.	0010	٠, ٠٠٠			,,000 01 10,001141	,,,,			1
line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  NONE  Bescription of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization    1 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization    1 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization    1 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization    1 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization    1 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization    1 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization in the organization in the organization in the orga		compensation not the organization												Yes	No
line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  NONE  Bescription of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization    1 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization    1 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization    1 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization    1 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization    1 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization    1 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization in the organization in the organization in the orga	3	Did the organization list any <b>former</b> officer	. director, or tru	ıste	e. ke	v en	olan	vee.	or i	highest compensated e	mplovee on				
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  NONE  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization Policy Compensation Pol	_				-,	,		,,					3		Х
and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  NONE  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization prometry than \$100,000 of compensation from the organization promet	4	•		le co	amo	ensa	ation	and	d oth	her compensation from	the organization				
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address NONE  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶  0			•							•	J		4		Х
Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization in	5										dual for services	3			
Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  (C)  (C)  (C)  (C)  (C)  (C		rendered to the organization? If "Yes," cor	nplete Schedul	e J f	or su	uch ,	pers	son					5		Х
the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  (B)  (C)  Compensation  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	Sec		· · · · · · · · · · · · · · · · · · ·												
(A) Name and business address NONE Description of services Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	1	Complete this table for your five highest c	ompensated inc	depe	ende	ent c	ontr	racto	ors t	hat received more than	\$100,000 of cor	npens	ation	rom	
Name and business address NONE Description of services Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization   0		the organization Report compensation for	the calendar y	ear	endı	ng w	vith g	or w	ıthır	the organization's tax	year				
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0															
\$100,000 of compensation from the organization   0		Name and business address NONE Description of services									ervices	С	ompe	nsatio	n
\$100,000 of compensation from the organization															
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\$100,000 of compensation from the organization	_	<del></del>	<del></del>						با.			_			
Troopeds of someone and the organization p	2	·		ot lii	mite	d to	_	~	sted	above) who received m	ore than				
F (IIII) //	_	trou,uou or compensation from the organ	ization 📂							· <del>-</del>			Fa	200	2012

93-0853818

Page 9

Form 990 (2013)

Form 990 (2013) Part VIII

NORTHWEST SECTION

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII 7C1 (D) Revenue excluded from tax under Related or Unrelated Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b **b** Membership dues c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 1f 1,318,238 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 1,318,238 h Total. Add lines 1a-1f Business Code 662,337. 662,337. 2 a PROGRAM/ENTRY FEES Program Service Revenue 713990 MEMBERSHIP DUES 713990 336,331. 336,331 All other program service revenue 998,668. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 104,308. 104,308. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 35,933 35,933. OTHER REVENUES 900099 11 a b All other revenue 35,933. Total. Add lines 11a-11d 2,457,147. 998,668. 140,241. Total revenue. See instructions. 12 332009 10-29-13

Form 990 (2013)

NORTHWEST SECTION

93-0853818 Page 10

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	Check if Schedule O contains a respon		this Part IX (B)		/D\
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	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	8,300.	8,300.		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	39,100.	39,100.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	}	}	1	
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	149,104.		149,104.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	EE1 006	655 636	05.660	
7	Other salaries and wages	771,296.	675,636.	95,660.	
8	Pension plan accruals and contributions (include	10 000	16 621	1 (50	
	section 401(k) and 403(b) employer contributions)	18,290. 86,103.	16,631. 79,456.	1,659. 6,647.	
9	Other employee benefits	86,103.	79,456	20,519.	
10	Payroll taxes	83,089.	62,570.	20,519.	
11	Fees for services (non-employees):	İ			
a	Management	44,673.	<del></del>	44,673.	
þ	Legal	36,417.		36,417.	· · <del>- · · · · · · · · · · · · · · · · ·</del>
C.	Accounting	30,417.		30,417.	<del></del>
d	, g				. <u>.</u>
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
9	Other (If line 11g amount exceeds 10% of line 25,	123,477.	121,054.	2 423	
40	column (A) amount, list line 11g expenses on Sch O.)	39,341.	39,066.	2,423.	
12	Advertising and promotion	117,479.	64,716.	52,763.	
13 14	Office expenses Information technology	11/,1/50	04,7101	32,7031	
15	Royalties				
16	Occupancy	33,341.		33,341.	<u> </u>
17	Travel	262,384.	175,448.	86,936.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	15,976.	15,749.	227.	
20	Interest	_,,	,		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,641.		5,641.	
23	Insurance	5,036.	_	5,036.	
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	EVENT EXPENSES & OTHER	71,362.	46,976.	24,386.	
b	COURT & FACILITY RENTAL	64,524.	64,524.		
С	PLAYER AWARDS/PRIZES	47,054.	47,054.		
d					
е		0.004.005	1 456 222		
25	Total functional expenses. Add lines 1 through 24e	2,021,987.	1,456,280.	565,707.	0
26	Joint costs Complete this line only if the organization		,		
	reported in column (B) joint costs from a combined			1	
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (2013

Form 990 (2013)

93-0853818 Page 11

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 100. 12,731. 1 Cash · non-interest-bearing 1,070,245. 1,299,718. 2 Savings and temporary cash investments 2 3 3 Pledges and grants receivable, net 94,558. 47,354 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 7 Notes and loans receivable, net 8 Inventories for sale or use 37,717. 14,160. Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 59,599 10a basis Complete Part VI of Schedule D 40,729. 9,627. 18,870. 10c b Less accumulated depreciation 10b 4,495,801. 5,213,282. 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets 49,543. 15 15 Other assets See Part IV, line 11 6,713,788. 5,649,918. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 28,442. 58,113. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 336,375. 316,825. 19 19 Deferred revenue 20 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, 22 key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 25 Schedule D 364,817. 374,938. 26 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 5,269,819. 6,338,850. 27 Unrestricted net assets 15,282. 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 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 32 Retained earnings, endowment, accumulated income, or other funds 5,285,101. 6,338,850. 33 33 Total net assets or fund balances 5,649,918. 6,713,788. Total liabilities and net assets/fund balances

UNITED STATES TENNIS ASSOCIATION/PACIFIC

orn	n 990 (2013) NORTHWEST SECTION	93-0	853818	Pa	ge <b>1</b> 2		
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI				<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)		2,45	7,1	47.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,02				
3	Revenue less expenses Subtract line 2 from line 1	3	43	5,1	60.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,28	5,1	01.		
5	Net unrealized gains (losses) on investments	5	61	8,5	89.		
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8			_		
9	· · · ·						
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,33	8,8	50.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				$\overline{\mathbf{x}}$		
				Yes	No		
1	Accounting method used to prepare the Form 990 Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedul	e O	_				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	ed on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	<u> </u>		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	ate basis,					
	consolidated basis, or both				i		
	X Separate basis 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 t	he audıt,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sc	hedule O			1		

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2013)

За

Act and OMB Circular A-133?

# SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

UNITED STATES TENNIS ASSOCIATION/PACIFIC Employer NORTHWEST SECTION

Employer identification number 93-0853818

Part I	Reason	for Public Char	rity Status (All organiz	ations mu:	st complet	te this par	t.) See inst	ructions	-			
The organ	zation is not a	a private foundation	because it is (For lines 1	through	11, check	only one b	ox.)					
1			s, or association of churc					١.				
2 🔲	•		70(b)(1)(A)(ii). (Attach Sc									
з 🗀			ital service organization of		ın <b>section</b>	170(b)(1)	(A)(ıii).					
4			operated in conjunction					(b)(1)(A)(ii	ii). Enter	the hospita	al's nam	ne,
	city, and stat		,		•							
5 🗀			benefit of a college or ur	niversity ov	wned or or	perated by	a governi	mental un	t describ	ed in		
·	_	(b)(1)(A)(iv). (Compl		,		,	Ü					
6 $\square$			nent or governmental unit	t describer	d in sectio	n 170(b)(	1)(A)(v).					
7	•		•					or from the	general	public des	cribed i	ın
,	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)											
. $\Box$	•		section 170(b)(1)(A)(vi). (	Complete	Part II \							
8 <u>X</u>			ceives (1) more than 33 1			rom contri	hutions m	nemhershi	n fees a	nd aross re	eceints	from
9 4			nctions - subject to certa									
			taxable income (less sect	uon sii ta	x) Ironi bu	1511165565	acquired b	y trie orga	anization	arter June	30, 197	
	See section 509(a)(2). (Complete Part III )  An organization organized and operated exclusively to test for public safety See section 509(a)(4).											
10											of one	~-
11 📖			perated exclusively for th									UI
			ations described in section				z) See sec	etion 509(	<b>a)(3).</b> On	eck the bo	x mai	
	describes the type of supporting organization and complete lines 11e through 11h  a Type I b Type II c Type III · Functionally integrated d Type III · Non-functionally integrated											
	a Type I		• •									_
e			at the organization is not									ın
			than one or more publicly						9(a)(1) or	section 50	9(a)(2)	
f	If the organiz	ation received a wri	tten determination from t	the IRS tha	atitisa ly	pe I, Type	II, or Type	e III				
		rganization, check t							_			
g			organization accepted ar									T
			directly controls, either al	one or tog	ether with	persons o	described	ın (II) and (	(III) below		Yes	No
	the gove	erning body of the s	supported organization?							11g(i)		
	(ii) A family	member of a perso	n described in (i) above?							11g(ıı		
	(ni) A 35% d	controlled entity of a	a person described in (i) o	or (II) above	97					11g(ıi	<u>) </u>	
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s)							
					_							
(ı) Name	of supported	(ii) EIN	(iii) Type of organization	r /	rganization		u notify the	(vi) ls organizati		(vii) Amoui	nt of mor	netary
	inization		(000011000 011 111100 1 0	in col. (i) lis	-		ion in col. r support?	(i) organiz U.S	ed in the	su	pport	
			above or IRC section (see instructions))	governing	document?	(1) 01 you	- Support		. /			
			(000 1110111011011)	Yes	No	Yes	No	Yes	No			
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

# Schedule A (Form 990 or 990-EZ) 2013 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						-				
Cale	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received (Do not										
	include any "unusual grants.")										
2	Tax revenues levied for the organ-										
	ızatıon's benefit and either paid to										
	or expended on its behalf										
3	The value of services or facilities										
	furnished by a governmental unit to					ĺ					
	the organization without charge										
4	Total. Add lines 1 through 3										
5	The portion of total contributions										
	by each person (other than a										
	governmental unit or publicly					ł					
	supported organization) included										
	on line 1 that exceeds 2% of the										
	amount shown on line 11,										
	column (f)										
	Public support. Subtract line 5 from line 4				<u></u>						
Sec	ction B. Total Support										
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total				
7	Amounts from line 4										
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties		'								
	and income from similar sources	- <u>-</u>									
9	Net income from unrelated business										
	activities, whether or not the										
	business is regularly carried on										
10	Other income. Do not include gain										
	or loss from the sale of capital										
	assets (Explain in Part IV)										
11	Total support. Add lines 7 through 10										
12	Gross receipts from related activities,	etc. (see instructi	ons)			12					
13	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3)					
~	organization, check this box and stop										
sec	ction C. Computation of Publi	c Support Pe	rcentage			<del> </del>					
	Public support percentage for 2013 (li	***		column (f))		14					
	Public support percentage from 2012				4.4 00.4/00/	15					
16a	33 1/3% support test - 2013. If the o	•			14 is 33 1/3% or n	nore, check this bo	x and				
	stop here. The organization qualifies a		-		d I 45 - 00 1/00/		<b>P</b>				
D	33 1/3% support test - 2012. If the o	•		•	ine 15 is 33 1/3%	or more, check th	lis box				
17^	and stop here. The organization quali	, ,			a 12 162 or 165 :	and line 14 is 100/	or more				
178	10% -facts-and-circumstances test	_									
	and if the organization meets the "fac					t iv now the organ	L C				
h	meets the "facts-and circumstances"	•	•		-	17a and line 15 is	10% or				
D	10% -facts-and-circumstances test	-									
	more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization										
12	Private foundation. If the organization		<del>-</del>	•	- · · · · -						
.0	Tivate tournation. If the organization	ulu not cileck a	DONOTHING TO, TO	u, 100, 17a, 01 17	w, check this box a	ara see manderion					

93-0853818 Page 3

Schedule A (Form 990 or 990 EZ) 2013 NORTHWEST SECTION

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to

Sec	qualify under the tests listed b	elow, please comp	piete Part II )				
_	endar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and	(4) 2000	(5) 2010	(6) 23	(4) 20 12	10/2010	(,, : 5.0
	membership fees received. (Do not						
	include any "unusual grants ")	1,181,278.	1,186,633.	1,267,793.	1,293,350.	1,318,238.	6,247,292.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the	767,176.			947,691.	998 668	
-	organization's tax-exempt purpose	707,170.	050,455.	005,255.	J41,0J1.	330,000.	3,331,237.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities		-				
	furnished by a governmental unit to the organization without charge		;				
6	Total. Add lines 1 through 5	1,948,454.	2,045,086.	2,137,052.	2,241,041.	2,316,906.	10,688,539.
7a	Amounts included on lines 1, 2, and					-	
	3 received from disqualified persons	1,179,270.	1,184,874.	1,265,248.	1,291,660.	1,318,238.	6,239,290.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
С	Add lines 7a and 7b	1,179,270.	1,184,874,	1,265,248.	1,291,660.	1,318,238.	6,239,290.
	Public support (Subtract line 7c from line 6.)					<u> </u>	4,449,249.
Sec	ction B. Total Support						<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6	1,948,454.	2,045,086.	2,137,052.	2,241,041.	2,316,906.	10,688,539.
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and income from similar sources	91,493.	114,043.	109,655.	126,814.	104,308.	546,313.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975	510.	4,464.		926.	10100	7,814. 554,127.
	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	92,003.	118,507.	111,569.	127,740.	104,308.	554,127.
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	41,138.	37,984.	39,022.	35,141.	35,933.	189,218.
13	Total support (Add lines 9, 10c, 11, and 12)	2,081,595.	2,201,577.	2,287,643.	2,403,922.	2,457,147.	11,431,884.
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3) organız	ation,
	check this box and stop here						
Section C. Computation of Public Support Percentage							
	Public support percentage for 2013 (li		•	olumn (f))		15	38.92 %
	16 Public support percentage from 2012 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage						
	<del></del>			- 40 1 (0)		<u></u>	4.85 %
	Investment income percentage for 20	•	•	e 13, column (f))	}	17	
	Investment income percentage from 2			on line 14, and line	15 is more than 2	18   3 1/3% and line 1	
19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							
b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and							
line 18 is not more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization							
20	20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions						

# UNITED STATES TENNIS ASSOCIATION/PACIFIC

Schedule A (Form 990 or 990 EZ) 2013 NORTHWEST SECTION	93-0853818 Page 4
Part IV Supplemental Information. Provide the explanations required by Part II, line	e 10, Part II, line 17a or 17b, and Part III, line 12
Also complete this part for any additional information. (See instructions)	
SCHEDULE A, PART III, LINE 12, EXPLANATION FOR O	THER INCOME:
OTHER INCOME (\$189,218)	
<del></del>	
<del></del>	
<u></u>	

# SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

UNITED STATES TENNIS ASSOCIATION/PACIFIC Employed.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

NORTHWEST SECTION

Employer identification number 93-0853818

Total number at and of year  Aggregate contributions to (during year)  Aggregate contributions to (during year)  Aggregate contributions to (during year)  Aggregate value at end of year  Det the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all denors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confering impormastice prote benefit grantees. Complete if the organization answered "Yes" to Form 990, Part IV, In e 7  Part III Conservation Easements held by the organization (here all that apoly)  Preservation of land for public use (e.g., recreation or advisor, or for any other purpose confering impormastice) or onservation of land for public use (e.g., recreation or advisor) important land area Protection of flatural habitat  Preservation of land for public use (e.g., recreation or advisor) important land area  Preservation of land for public use (e.g., recreation or advisor) important land area  Preservation of land for public use (e.g., recreation or advisor) important land area  Preservation of land for public use (e.g., recreation or advisor) important land area  Preservation of land for public use (e.g., recreation or advisor) important land area  Preservation of land for public use (e.g., recreation or advisor) important land area  Preservation of land for public use (e.g., recreation or advisor) important land area  Preservation of land for public use (e.g., recreation or advisor) important land area  Preservation of land for public use (e.g., recreation or advisor) important land area  Preservation of land for public use (e.g., recreation or advisor) important land area  I Protection of flatural habitation and land land land land land land land	Pa			s or Accounts.Complete if the	
1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate value at end of year 5 Did the organization of groperty, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring morphismsoble private benefit?  Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7  1 Purpose(s) of conservation easements held by the organization (check all that apply)  1 Preservation of natural habitat preservation of public use (e.g., recreation or education)  1 Protection of natural habitat Preservation of open space 2 Complete lines 2 a through 2 df if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year  a Total number of conservation easements  5 Total acreage restricted by conservation easements  6 Number of conservation easements included in (c) acquired after 8/17/08, and not on a histonic structure listed in the National Register  7 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  2 Number of states where property subject to conservation easements in thotals?  3 Number of states where property subject to conservation easements in thotals?  4 Number of states where property subject to conservation easements though the year part or the property of the property of the property organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements in thotals?  5 Does the organiza		organization answered "Yes" to Form 990, Part IV, line		(h) Funds and other accounts	
2 Aggregate contributions to (during year)  3 Aggregate value at end of year  4 Aggregate value at end of year  5 Dot the organization inform all dinors and donor advisors in writing that the assets held in donor advised funds are the organization inform, subject to the organization's exclusive legal control?  6 Dot the organization inform all grantees, denors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor advisor, or for any other purpose conferring incomplete the purpose and not for the benefit of the donor advisor, or for any other purpose conferring incomplete in the organization answered "Ves" to Form 990, Part IV, line 7  1 Purpose(s) of conservation Easements. Complete if the organization answered "Ves" to Form 990, Part IV, line 7  1 Purpose(s) of conservation easements held by the organization (check all that apply)    Preservation of land for public use (e.g., recreation or education)   Preservation of an historically important land area   Preservation of pans pace   Preservation of open space   Complete heigh 2 and the lability of the expanization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year			(a) Donor advised funds	(b) Furios and other accounts	
3 Aggregate grants from (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization's exclusive legal control?					
4 Aggregate value at end of year  5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advisors in writing that the assets held in donor advisors in writing that grant funds can be used only for chartable purposes and not for the benefit of the donor or donor advisors in writing that grant funds can be used only for chartable purposes and not for the benefit of the donor or donor advisors in writing that grant funds can be used only for chartable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Part III Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7  Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of open space  2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year  a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements in ordified, transferred, released, extinguished, or terminated by the organization during the tax year    Number of states where property subject to conservation easement is located		<del>-</del>		<del></del>	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization's exclusive legal control?  6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7  1 Purpose(s) of conservation easements held by the organization (check all that apply)    Preservation of land for public use (e.g., recreation or education)   Preservation of an Instoncially important land area   Protection of natural habitat   Preservation of natural habitat   Preservation of natural habitat   Preservation of a certified historic structure   Preservation   Preservation easement on the last day of the tax year   Preservation easements   Preservation easemen		, , ,			
are the organization's property, subject to the organization's exclusive legal control?  Ob the organization informal ligrantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7  Purpose(s) of conservation easements held by the organization (check all that apply)  Preservation of land for public use (e.g., recreation or education)  Preservation of an instructural habitat Preservation of perservation of open space  Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year  a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  A Number of states where property subject to conservation easement is located by subject to devolutions, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspection, and enforcing conservation easements during the year by \$  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements in this revenue and expense statement, and balance sheet, and nuclude, if applicable, the text of the footnote to the organization easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's security in Park IVII, (Algonization expense)		,			
6 Did the organization inform all grantless, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferming impermissible private benefit?    Part III   Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7   Purpose(s) of conservation easements held by the organization (check all that apply)   Preservation of land for public use (e.g., recreation or education)   Preservation of an historically important land area   Protection of natural habitat   Proservation of natural habitat   Preservation of or natural habitat   Preservation of or natural habitat   Preservation of organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year   Held at the Ead of the Tax Year   2a   Held at the Ead of the Tax Year   2b   Tatal number of conservation easements   Preservation of conservation easements   Preservation   Pre	5	-	-		
for charable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferming more missible private benefit?    Part     Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7    Purpose(s) of conservation easements held by the organization (check all that apply)   Preservation of land for public use (e.g., recreation or education)   Preservation of an historically important land area   Protection of natural habitat   Preservation of poen space   Preservation of open space   Preservation of a conservation easement on the last day of the tax year   Preservation of a conservation easements   Preservation of a conservation easement on the last day of the tax year   Preservation of conservation easements on a certified historic structure included in (a)   Preservation of conservation easements on a certified historic structure included in (a)   Preservation of conservation easements on a certified historic structure included in (a)   Preservation of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year   Preservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year   Preservation easements in sociated   Preservation easements during the year   Preservation easements of the conservation easements in sociated   Preservation easements during the year   Preservation easements of the conservation easements in section, and enforcing conservation easements during the year   Preservation easements of enforcing conservation easements during the year   Preservation easements of enforcing conservation easem	_				
Part II   Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7    Purpose(s) of conservation easements held by the organization (check all that apply)   Preservation of land for public use (e.g., recreation or education)   Preservation of an historically important land area   Protection of natural habitat   Preservation of open space   Preservation of open space   Preservation of open space   Preservation of open space   Complete lines 2 a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year   Held at the End of the Tax Year   2a	6				
Part II   Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7  1 Purpose(s) of conservation easements held by the organization (check all that apply)			or donor advisor, or for any other purpose		
1 Purpose(s) of conservation easements held by the organization (check all that apply)  Preservation of land for public use (e.g., recreation or education)  Preservation of an histonically important land area  Protection of natural habitat  Preservation of open space  2 Complete lines 2 a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year  a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements included in (c) acquired after 8/17/06, and not on a histonic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  Number of states where property subject to conservation easement is located ▶  Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶  Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(6)(h)  and section 170(h)(4)(B)(6)(h)?  In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization is financial statements that describes the organization's accounting for conservation easements  If the organization sMaintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  If the organization received or held works of art, historical treasures, or other similar assets held for	Da				
Preservation of and for public use (e.g., recreation or education)  Preservation of a mistorically important land area  Protection of natural habitat  Preservation of a certified historic structure  Preservation of open space  2. Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year  a. Total number of conservation easements  b. Total acreage restricted by conservation easements  c. Number of conservation easements on a certified historic structure included in (a)  d. Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register  3. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year  4. Number of states where property subject to conservation easements is located ▶  5. Does the organization have a written policy regarding the penodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  6. Staff and volunteer hour devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶  7. Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶  8. Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(0)  9. In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements  Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  1. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public ex		<del></del>		Part IV, line /	
Protection of natural habitat	1			akalliadaak ladia	
Preservation of open space  2 Complete lines 2s through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year  a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements on a certified historic structure included in (a)  d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  4 Number of states where property subject to conservation easement is located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶  7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶  8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(h)(h)(B)(h)(h)(B)(h)(h)(h)(B)(h)(h)(h)(B)(h)(h)(h)(B)(h)(h)(h)(h)(B)(h)(h)(h)(h)(h)(h)(h)(h)(h)(h)(h)(h)(h)			· —	• •	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year  a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  4 Number of states where property subject to conservation easement is located ▶  5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶  8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(a))  9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items  b If the organization elected, as permitted under SFAS 116 (ASC 958), to report			Preservation of a cer	titled historic structure	
a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year   4 Number of states where property subject to conservation easement is located   5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year   7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year   8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(l)   9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements  Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.  Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these terms  b If the organization elected, as permitted und	_	• •	f I		
a Total number of conservation easements  b Total acreage restricted by conservation easements  c Number of conservation easements on a certified historic structure included in (a)  d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶  4 Number of states where property subject to conservation easement is located ▶  5 Does the organization have a written policy regarding the penodic monitioning, inspection, handling of violations, and enforcement of the conservation easements it holds?  7 Amount of expenses incurred in monitioning, inspecting, and enforcing conservation easements during the year ▶  8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(li)  and section 170(h)(4)(B)(li)  9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements  Complete if the organization answered "Yes" to Form 990, Part IV, line 8.  1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items  b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to thes	2		ned conservation contribution in the form	of a conservation easement on the last	
a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register  3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year		day of the tax year		Hold at the End of the Tay Year	
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(i) Revenues included in Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.		•	,	, , , , , , , , , , , , , , , , , , , ,	
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2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.				► \$	
the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.	2		asures, or other similar assets for financia		
	-	·		<u> </u>	
b Assets included in Form 990, Part X	а		, , · · · · · · · · · · · · · ·	<b>&gt;</b> \$	
				<b>▶</b> \$	

UNITED STATES TENNIS ASSOCIATION/PACIFIC 93-0853818 NORTHWEST SECTION Schedule D (Form 990) 2013 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply). а Public exhibition Loan or exchange programs h Scholarly research Other Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 4 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included \_\_ Yes on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table Amount 1c c Beginning balance Additions during the year 1d e Distributions during the year 1e Ending balance 1f Yes No 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII **Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (c) Two years back (d) Three years back (e) Four years back (a) Current year (b) Prior year 1a Beginning of year balance **b** Contributions c Net investment earnings, gains, and losses d Grants or scholarships Other expenditures for facilities and programs Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment b Permanent endowment ► c Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization Yes No by (i) unrelated organizations 3a(ı) (ii) related organizations 3a(11) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b Describe in Part XIII the intended uses of the organization's endowment funds Part Vi Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
<b>b</b> Buildings				
c Leasehold improvements				
d Equipment		41,099.	24,542.	16,557
e Other		18,500.	16,187.	2,313
otal. Add lines 1a through 1e (Column (d) mus	t equal Form 990. Part X. colur	nn (B), line 10(c),)	<b>•</b>	18,870

Schedule D (Form 990) 2013

9<u>3-0853818 Page 3</u>

Schedule D (Form 990) 2013

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v		d-of-year market value
1) Financial derivatives				
2) Closely-held equity interests				
) Other			<del>-</del>	
(A)				
(B)				
(C) _				
(D)				
(E)	<del></del>	<del>                                     </del>		
(F)		-		
(G)				
(H)			·-	
tal (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" to	o Form 990. Part IV. line	e 11c See Form 990. F	Part X. line 13	
(a) Description of investment	(b) Book value			d of-year market value
(1)		-		<u> </u>
(2)				·
(3)	<del>-</del>			
(4)		<u> </u>		·
(5)		<del>                                     </del>	<del> </del>	<del></del>
(6)			··	··· <del>···</del>
(7)	<del> </del>	· -		
			<del></del>	<u></u>
(8)		<del>                                     </del>		<del></del>
(9) tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶				
Part IX Other Assets.				
Complete if the organization answered "Yes" to	o Form 990, Part IV, line rescription	11d. See Form 990, F	Part X, line 15	(b) Book value
Complete if the organization answered "Yes" to (a) D		11d. See Form 990, F	Part X, line 15	(b) Book value
Complete if the organization answered "Yes" to (a) D (1) (2)		11d. See Form 990, F	Part X, line 15	(b) Book value
Complete if the organization answered "Yes" to  (a) D  (1)  (2)  (3)		11d. See Form 990, F	Part X, line 15	(b) Book value
Complete if the organization answered "Yes" to (a) D (1) (2) (3) (4)		11d. See Form 990, F	Part X, line 15	(b) Book value
Complete if the organization answered "Yes" to (a) D (1) (2) (3) (4) (5)		e 11d. See Form 990, F	Part X, line 15	(b) Book value
(a) D (1) (2) (3) (4) (5)		11d. See Form 990, F	Part X, line 15	(b) Book value
(1) (2) (3) (4) (5) (6) (7)		11d. See Form 990, F	Part X, line 15	(b) Book value
Complete if the organization answered "Yes" to (a) D (1) (2) (3) (4) (5) (6) (7) (8)		11d. See Form 990, F	Part X, line 15	(b) Book value
Complete if the organization answered "Yes" to (a) D (1) (2) (3) (4) (5) (6) (7) (8) (9)	escription	11d. See Form 990, F	Part X, line 15	(b) Book value
Complete if the organization answered "Yes" to  (a) D  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  tal. (Column (b) must equal Form 990, Part X, col (B) line art X Other Liabilities.	escription 15)			
Complete if the organization answered "Yes" to  (a) D  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Ital. (Column (b) must equal Form 990, Part X, col (B) line Part X  Other Liabilities.  Complete if the organization answered "Yes" to	escription 15)	11e or 11f See Form		
Complete if the organization answered "Yes" to  (a) D  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  tal. (Column (b) must equal Form 990, Part X, col (B) line art X Other Liabilities.  Complete if the organization answered "Yes" to  (a) Description of liability	escription 15)			
Complete if the organization answered "Yes" to  (a) D  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  tal. (Column (b) must equal Form 990, Part X, col (B) line  art X Other Liabilities.  Complete if the organization answered "Yes" to  (a) Description of liability  (1) Federal income taxes	escription 15)	11e or 11f See Form		
Complete if the organization answered "Yes" to  (a) D  (1)  (2) (3) (4) (5) (6) (7) (8) (9) tal. (Column (b) must equal Form 990, Part X, col (B) line eart X Other Liabilities.  Complete if the organization answered "Yes" to  (a) Description of liability  (1) Federal income taxes (2)	escription 15)	11e or 11f See Form		
Complete if the organization answered "Yes" to  (a) D  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  tal. (Column (b) must equal Form 990, Part X, col (B) line art X Other Liabilities.  Complete if the organization answered "Yes" to  (a) Description of liability  (1) Federal income taxes  (2)  (3)	escription 15)	11e or 11f See Form		
Complete if the organization answered "Yes" to  (a) D  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Ital. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" to  (a) Description of liability  (1) Federal income taxes  (2)  (3)  (4)	escription 15)	11e or 11f See Form		
Complete if the organization answered "Yes" to  (a) D  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Part X Other Liabilities.  Complete if the organization answered "Yes" to  (a) Description of liability  (1) Federal income taxes  (2)  (3)	escription 15)	11e or 11f See Form		
Complete if the organization answered "Yes" to  (a) D  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Ital. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" to  (a) Description of liability  (1) Federal income taxes  (2)  (3)  (4)	escription 15)	11e or 11f See Form		
Complete if the organization answered "Yes" to  (a) D  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Ital. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" to  (a) Description of liability  (1) Federal income taxes  (2)  (3)  (4)	escription 15)	11e or 11f See Form		
Complete if the organization answered "Yes" to  (a) D  (1) (2) (3) (4) (5) (6) (7) (8) (9) Intal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" to  (a) Description of liability  (1) Federal income taxes (2) (3) (4) (5) (6)	escription 15)	11e or 11f See Form		
Complete if the organization answered "Yes" to  (a) D  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Ital. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" to  (a) Description of liability  (1) Federal income taxes  (2)  (3)  (4)  (5)  (6)  (7)	escription 15)	11e or 11f See Form		

UNITED STATES TENNIS ASSOCIATION/PACIFIC 93-0853818 Page 4 NORTHWEST SECTION Schedule D (Form 990) 2013 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 3,042,736. Total revenue, gains, and other support per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part VIII, line 12 2 618,589 2a a Net unrealized gains on investments 2b b Donated services and use of facilities 2c c Recoveries of prior year grants d Other (Describe in Part XIII.) 2d 618,589. 2e e Add lines 2a through 2d 2,424,147. 3 Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 33,000. 4b b Other (Describe in Part XIII ) 33,000. 4c c Add lines 4a and 4b 2,457,147. Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1,988,987. 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25. 2 2a Donated services and use of facilities 2b b Prior year adjustments 2c c Other losses 2d d Other (Describe in Part XIII ) 0. e Add lines 2a through 2d 2e 1,988,987. 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 4a 33,000. 4b b Other (Describe in Part XIII.) 33,000. 40 c Add lines 4a and 4b 2,021,987. Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SPONSORSHIP EXPENSE 33,000.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

SPONSORSHIP EXPENSE 33,000.

2 | Employer identification number 93-0853818 Open to Public OMB No 1545-0047 Inspection X 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 ■ Information about Schedule I (Form 990) and its instructions is at www its gov/form990.

UNITED STATES TENNIS ASSOCIATION / PACIFIC Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. NORTHWEST SECTION General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Department of the Treasury Internal Revenue Service SCHEDULEI (Form 990) Part 0

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	Governments and \$5,000 Part II car	d Organizations in the be duplicated if addit	e United States. Colonal space is need	omplete if the orga	inization answered "Y	es" to Form 990, Part IV	, line 21, for any
1 (a) Name and address of organization or government	( <b>p</b> ) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
		I					
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3. Enter total number of other organizations listed in the line 1 table.	and government or	ganizations listed in the	ne line 1 table				
lσ	s, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2013)

332101 10-29-13

# UNITED STATES TENNIS ASSOCIATION/PACIFIC

NORTHWEST SECTION

Schedule I (Form 990) (2013)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed

Page 2

93-0853818

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) EXPLANATION: THE ORGANIZATION MONITORS THE USE OF GRANT FUNDS THROUGH GRANT Part IV | Supplemental Information. Provide the information required in Part I, line 2. Part III, column (b), and any other additional information SITE VISITS (d) Amount of non-cash assistance 0 ACCOUNTABILITY REPORTS AND FOLLOWS UP BASED ON THE REPORTS. 39,100, (c) Amount of cash grant 71 (b) Number of recipients SUBSIDY GRANTS AND TRAVEL ASSISTANCE GRANTS ARE ALSO DONE WHEN NEEDED. (a) Type of grant or assistance PART I, LINE

Schedule I (Form 990) (2013)

## SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

# 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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 UNITED STATES TENNIS ASSOCIATION/PACIFIC Emplo NORTHWEST SECTION

Employer identification number 93-0853818

OMB No 1545-0047

Open to Public

Inspection

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE UNITED STATES TENNIS ASSOCIATION PACIFIC NORTHWEST SECTION ("USTA/PNW") IS DEDICATED TO PROMOTING AND DEVELOPING RECREATIONAL AND COMPETITIVE TENNIS BY PROMOTING AND SUPERVISING TOURNAMENTS; PROMOTING AND SPONSORING EDUCATIONAL PROGRAMS: PROMOTING AND SPONSORING COMPETITIVE EVENTS FOR THE PURPOSE OF QUALIFYING ITS MEMBERS FOR COMPETITIONS IN NATIONAL AND INTERNATIONAL COMPETITIVE EVENTS: AND PROMOTING AND SPONSORING A PUBLIC RELATIONS CAMPAIGN TO ENCOURAGE MEMBERSHIP AND RAISE AWARENESS OF THE GAME OF TENNIS. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: JUNIOR COMPETITION - A MYRIAD OF COMPETITIVE PROGRAMS COMMITTED TO THE DEVELOPMENT OF JUNIOR PLAYERS, INCLUDING YEAR-ROUND TRAINING, TOURNAMENTS, TEAM PLAY, AND RELATED TRAVEL. PROGRAMS FOR TALENTED STUDENT ATHLETES AGES 6-18 HELP DEVELOP NECESSARY TENNIS SKILLS AND BUILD CHARACTER THROUGH THE SPORT. THROUGH TRAINING, PARTICIPANTS DEVELOP DISCIPLINE, DECISION-MAKING SKILLS, SELF-ESTEEM, THE ABILITY TO FOCUS ON GOALS, AND COMMITMENT TO HIGH STANDARDS WITH AN EMPHASIS ON ACADEMIC SUCCESS AND COLLEGE ASPIRATION. EXPENSES \$ 242,364. INCLUDING GRANTS OF \$ 23,228. **REVENUE \$ 83,584.** RECREATIONAL PROGRAMMING - THROUGH THE EFFORTS OF THE USTA/PNW AND ITS PARTNERS AND FUNDERS, LOCAL TENNIS PROGRAMS THROUGHOUT THE SECTION HELP UNDERSERVED STUDENTS PURSUE THEIR GOALS AND HIGHEST DREAMS BY SUCCEEDING IN SCHOOL, IMPROVING THEIR HEALTH AND NUTRITION. AND

THE PLAY TO LEARN PROGRAM PROVIDES AFFORDABLE TENNIS LESSONS FOR PLAYERS OF ALL AGES AND SKILLS LEVELS IN HIGH-ENERGY, SAFE AND SOCIAL LEARNING ENVIRONMENTS. YOUTH BENEFIT FROM FREE MODIFIED TENNIS EOUIPMENT THAT PROMOTES SUCCESS ON THE FIRST DAY AND INTEGRATED CHARACTER DEVELOPMENT LESSONS. THE FAMILY FRIENDLY TENNIS PROGRAM INTRODUCES ENTIRE FAMILIES TO TENNIS AS A FITNESS ACTIVITY AND TEACHES SKILLS AND COMMUNICATION TECHNIQUES TO BE ENJOYED THROUGHOUT THEIR THE TENNIS AFTERSCHOOL ZONE CONNECTS IN-SCHOOL AND AFTER-SCHOOL LIVES. PROGRAMS THROUGH FORMALIZED TEACHER TRAINING, FREE ACCESS TO EQUIPMENT, AND STANDARDIZED, NATIONALLY-RECOGNIZED CURRICULA TO HELP ACHIEVE SCHOOL'S HEALTH AND WELLNESS GOALS THROUGH TENNIS. SCHOLARSHIPS AND GRANTS ARE AVAILABLE FOR ALL ASSOCIATION RECREATIONAL PROGRAMS. INCLUDING GRANTS OF \$ 0. EXPENSES \$ 110,203. REVENUE \$ 11,671.

FORM 990, PART VI, SECTION A, LINE 6:

EXPLANATION: THE UNITED STATES TENNIS ASSOCIATION PACIFIC NORTHWEST SECTION HAS ORGANIZATIONAL AND INDIVIDUAL MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A:

EXPLANATION: A MAJORITY OF THE VOTES ENTITLED TO BE CAST BY THE MEMBERS AS

DEFINED IN THE CORPORATION'S ARTICLES OF INCORPORATION SHALL CONSTITUTE A

QUORUM FOR THE TRANSACTION OF BUSINESS AT ANY MEETING OF THE MEMBERSHIP.

THE ACT OF THE MAJORITY OF THE VOTES ENTITLED TO BE CAST AT A MEETING IN

WHICH A QUORUM IS PRESENT SHALL BE THE ACT OF THE MEMBERSHIP. ALL VOTES

MUST BE CAST BY A DULY AUTHORIZED REPRESENTATIVE OF A VOTING MEMBER, IN THE

CASE OF ORGANIZATIONAL MEMBERS, AND BY THE INDIVIDUAL MEMBER HIMSELF OR

HERSELF IN THE CASE OF INDIVIDUAL MEMBERS, AND VOTES BY PROXY SHALL NOT BE

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization UNITED STATES TENNIS ASSOCIATION/PACIFIC NORTHWEST SECTION	Employer identification number 93-0853818
PERMITTED.	
FORM 990, PART VI, SECTION B, LINE 11:	
EXPLANATION: THE BOARD OF DIRECTORS AND THE EXECUTIVE DIR	ECTOR REVIEW THE
FORM 990 PRIOR TO FILING WITH THE IRS.	
FORM 990, PART VI, SECTION B, LINE 12C:	
EXPLANATION: ANY POTENTIAL CONFLICTS OF INTEREST ARE DISC	USSED DURING BOARD
MEETINGS.	
FORM 990, PART VI, SECTION B, LINE 15A:	
EXPLANATION: THE EXECUTIVE DIRECTOR'S COMPENSATION WAS AP	PROVED BY THE USTA
PACIFIC NORTHWEST EXECUTIVE BOARD MEMBERS AFTER REVIEW AN	D DELIBERATION OF
HIS PERFORMANCE AND THE COMPARABLE USTA EXECUTIVE DIRECTO	RS COMPENSATION
RANGE ACROSS THE COUNTRY. A WRITTEN APPROVAL NOTICE WAS	SENT TO THE
INDEPENDENT BOOKKEEPING FIRM BY THE BOARD PRESIDENT.	
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: THE ORGANIZATION MAKES ITS GOVERNING DOCUMEN	TS, CONFLICT OF
INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO TH	E PUBLIC UPON
REQUEST. GOVERNING DOCUMENTS AND CERTAIN POLICIES WILL A	LSO BE ON THE
ORGANIZATION'S WEBSITE.	