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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)

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.

2016 Open to Public Inspection

OMB No 1545-0047

For the 2016 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable ARKANSAS TENNIS ASSOCIATION, Address change 23-7372183 Doing business as Name change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number 501-227-7611 2024 ARKANSAS VALLEY DRIVE, STE 302 Initial return Final return/ City or town, state or province, country, and ZIP or foreign postal code AR 72212 953,280 LITTLE ROCK G Gross receipts \$ Amended return Name and address of principal officer H(a) is this a group return for subordinates? Application pending DEANNA GARRETSON 2024 ARKANSAS VALLEY DRIVE, STE 302 H(b) Are all subordinates included? If "No " attach a list (see instructions) LITTLE ROCK 722112 X 501(c) 501(c)(3) Tax-exempt status Website· ▶ WWW.ARKTENNIS.COM H(c) Group exemption number Year of formation 1969 X Corporation Trust M State of legal domicile Form of organization Part I Summary 1 Briefly describe the organization's mission or most significant activities TO PROMOTE AND DEVELOP THE GROWTH OF TENNIS. 4102 I & AON GANNEDS & Governance 2 Check this box ► I if the organization discontinued its operations or disposed of more than 25% of its net assets 12 3 Number of voting members of the governing body (Part VI, line 1a) 12 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 18 5 5 Total number of individuals employed in calendar year-2016 (Part V, line-2a) 56 6 6 Total number of volunteers (estimate if necessary) 7,440 7a 7a Total unrelated business revenue from Part VIII, column (C), line 12 -40,918 7b b Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year RECEIVED 273,908 293 293 8 Contributions and grants (Part VIII, line 1h) 659,552 602,998 9 Program service revenue (Part VIII, line 2g) NOV 07 2017 526 2,650 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) ,160 7,440 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c and 943,550 905,977 12 Total revenue – add lines 8 through 11 (must equal Part VIII) column-(A), line-11 ogue 30,663 9,611 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 470,224 471,403 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 56,857 b Total fundraising expenses (Part IX, column (D), line 25) 426,620 456,339 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 928,686 936,174 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) ,376 -22,709 19 Revenue less expenses Subtract line 18 from line 12 End of Year Beginning of Current Year 941,706 949,878 20 Total assets (Part X, line 16) 20,590 4,053 21 Total liabilities (Part X, line 26) 945,825 921,116 22 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign EXECUTIVE DIRECTOR DEANNA GARRETSON Here Type or print name and title Print/Type preparer's name PTIN 's signature Check Paid Dell , CA DAVID CHAPPELL P00573009 self-employed Preparer 71-0598221 HOWLAND & NORRIS CPA'S Firm's EIN Firm's name **Use Only** 401 W. CAPITOL, SUITE 501 501-372-3112 LITTLE ROCK, AR 72201 Firm's address X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

Form 990 (2016)

	ARRANSAS TENNI		23-13/2183		Page Z
	_	Service Accomplishments	1		X
		tains a response or note to an	y line in this Part III		
•	ribe the organization's mission	P THE GROWTH OF TE	NNIS.		
	nization undertake any signifi 90 or 990-EZ?	cant program services during the year	which were not listed on the		Yes X No
If "Yes," des	cribe these new services on S				Tes NO
services?		make significant changes in how it co	nducts, any program		Yes X No
	cribe these changes on Sche	dule O ce accomplishments for each of its thr	ee largest program services, as	measured hy	
	= = = = = = = = = = = = = = = = = = = =) organizations are required to report t			
		r each program service reported			
		568,883 including grants of PROGRAMS: SPONSOMENTS AND OTHER TEN	DRSHIP AND) (Revenue \$	653,107)
TENNIS A		3,073 including grants of S: EXPENSES TO ATT NUAL MEETINGS, UNITED TO AND AR TENNIS	TEND SOUTHERN TED STATES TENNI) (Revenue \$	6,445)
			•		
4c (Code) (Expenses \$	including grants o	f \$) (Revenue \$)
44 01	(Described O	tulo O)			
4d Other program (Expenses \$	m services (Describe in Sche 26,092	dule O) including grants of \$) (Revenue \$)
	n service expenses	598,048			
-					000

DAA

P	art 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 (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			i
	Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	j		
	"Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		i	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	i	1	
	complete Schedule D, Part III	8		_ <u>X</u> _
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	ı	ł	
	custodian for amounts not listed in Part X or provide credit counseling, debt management, credit repair, or	}	l	
	debt negotiation services? If "Yes," complete Schedule D, Part IV	_9		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted		1	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11 -	· · · · · · · · · · · · · · · · · · ·		1	
	VII, VIII, IX, or X as applicable			₩ .
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"]	.	
	complete Schedule D, Part VI	<u>11a </u>	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	445	•	
	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	44-		x
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	444		x
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 11e		$\frac{\mathbf{x}}{\mathbf{x}}$
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
f	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u>'''</u>	-+	
124	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
~	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	$\neg \neg$	X
14a		14a		X
b				
	fundraising, business, investment, and program service activities outside the United States, or aggregate	- 1	1	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>x</u> _
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or		Í	
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>x</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	1	1	
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	1	- }	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on])	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	_	<u>x</u> _
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		}	
	If "Yes," complete Schedule G, Part III	19		<u> </u>
		E a ···	_ uun	(2046)

Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	ļ		
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		ļ	
	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		<u> </u>
b		24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	- [ľ	
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	Ì	İ	
		25a		X
b		}	}	
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	}	1	
		25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	1		
	current or former officers, directors, trustees, key employees, highest compensated employees, or			37
	disqualified persons? If "Yes," complete Schedule L, Part II	26	}	- X -
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,]	j	
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled		,	x
••	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		1	
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	200	ţ	X
a		28a		
b		28b	[x
_		200		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	1	x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
50	conservation contributions? If "Yes," complete Schedule M	30	Ì	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
•	Part I	31	1	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			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	_ 1	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	1	- 1	
	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	- 1	}	
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	- 1		
	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? Note. All Form 990 filers are required to complete Schedule O	38	X	
		_	nan	

Pa	ort 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 1a 19		768	NO
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			l
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			I
•	reportable gaming (gambling) winnings to prize winners?	1c	х	İ
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 18		-	
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)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	х	ļ
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	X	
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			l
	account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			
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
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	_5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	_6a_		X
.b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	- 6b	_	
7	Organizations that may receive deductible contributions under section 170(c).		1	
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?	72		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1,5		
•	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised fundsDid a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		1	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations.Enter			:
а	Initiation fees and capital contributions included on Part VIII, line 12		Ī	
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		[
	Section 501(c)(12) organizations.Enter		Ì	
	Gross income from members or shareholders 11a		I	
	Gross income from other sources (Do not net amounts due or paid to other sources		ļ	
	against amounts due or received from them) Section 4947(a)(4) non-exempt charitable trusts is the assessment of first 5000 in law of Form 19413	-	Ì	
	Section 4947(a)(1) non-exempt charitable trusts.Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
	Section 501(c)(29) qualified nonprofit health insurance issuers.		- [
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
	Enter the amount of reserves the organization is required to maintain by the states in which		1	
	the organization is licensed to issue qualified health plans		I	
	Enter the amount of reserves on hand	7	1	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			~~~	

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI  $|\mathbf{X}|$ Section A. Governing Body and Management Yes No 12 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 12 Enter the number of voting members included in line 1a, above, who are independent 1b b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X any other officer, director, trustee, or key employee? 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? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X 8a The governing body? X 8b Each committee with authority to act on behalf of the governing body? 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 X. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Yes X 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, X 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 13 Did the organization have a written whistleblower policy? X 14 14 Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a 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 16b organization's exempt status with respect to such arrangements? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available 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) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records 2024 AR VALLEY, STE 302 DEANNA GARRETSON AR 72212 LITTLE ROCK

			-					-	
		•					•	•	
Form 990 (2016) ARKANSAS	TENNIS A	ASSO	CI.	ATI	ON,	, ]	INC. 23-737	2183	Page 7
							Key Employees, High	est Compensated E	mployees, and
` Independent Co	ontractors								<u></u>
Check if Schedu	ile O contains	a res	spon	se o	<u>r not</u>	e to	any line in this Part \	<u>/II</u>	
Section A. Officers, Directors	s, Trustees, Key	Empl	loyee	s, an	d Hig	hes	t Compensated Employe	es	<del></del>
<b>1a</b> Complete this table for all persons organization's tax year	s required to be l	sted F	Repor	t com	pensa	ation	for the calendar year ending	ig with or within the	
<ul> <li>List all of the organization's cui compensation Enter -0- in columns (</li> </ul>	D), (E), and (F) if	no cor	mpen	sation	was	paid		_	
<ul> <li>List all of the organization's cui</li> </ul>									
<ul> <li>List the organization's five curr who received reportable compensation organization and any related organization.</li> </ul>	on (Box 5 of Form	pensate n W-2 a	ed en and/o	nploye r Box	es (o 7 of F	ther orm	than an officer, director, tru 1099-MISC) of more than \$	stee, or key employee) \$100,000 from the	
<ul> <li>List all of the organization's for \$100,000 of reportable compensation</li> </ul>	n from the organi	zation :	ánd a	ny re	ated	orga	nızatıons		
<ul> <li>List all of the organization's for organization, more than \$10,000 of re</li> </ul>	eportable comper	sation	from	the o	rganız	atio	n and any related organizat	ions	
List persons in the following order incompensated employees, and former		or direc	ctors,	ınstiti	itiona	i trus	stees, officers, key employe	es, highest	
Check this box if neither the orga	nization nor any	related	orga	nızatı	on cor	npe	nsated any current officer, o	firector, or trustee	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, u	not che unless	ck more person a directive employee	is both	an	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

	week (list any					ıs both or/trusi		from the	related organizations	other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) BRAD PHELPS	<del> </del>	┼	├			-		<del> </del>		
(1) BRAD FRELES	0.00		ł	ł		}	l	Ì		
VICE-PRESIDENT	0.00	x		x		{		Ò	О	0
(2) BOB WAGSTAFF	0.00	<del>  **</del>		-	<u> </u>	<del>                                     </del>	-			
(2)202 111100211112	0.00						ļ		!	
DIRECTOR	0.00	$ \mathbf{x} $						l	o	0
(3) TAYLOR DODDS		<u> </u>			1					
	0.00					[		ĺ		
DIRECTOR	0.00	X	ļ	}				) o	0	0
(4) BOB LUCKY			Ī							
	0.00				ļ	] ,	ļ			
DIRECTOR	0.00	X	$\mathbb{L}_{-}$					0	0	0
(5) CRYSTAL NOBLE	}									
	0.00		1		]			}		
PRESIDENT	0.00	X		X				0	0	0
(6) JENNIFER TUCKER										
	0.00			1						
VICE-PRESIDENT	0.00	X		X				0	0	0
(7) JOSEPH MURPHY		<b>!</b>								
	0.00									
DIRECTOR	0.00	X						0	0	0
(8) GARY JONES										
	0.00									
VICE-PRESIDENT	0.00	X		X		<b> </b>		0	0	0
(9) STEVE DUFFEL										
	0.00									•
DIRECTOR	0.00	X						0	0	0
(10) ELIZABETH MICHAE										
	0.00					}				^
DIRECTOR	0.00	X						0	0	0
(11) VANESSA ROPER	0.00									
D-TDTCMOD	0.00	,,		ł	1			0	o	0
DIRECTOR	0.00	X		1	1			<u>_</u>		<u> </u>

Total number of independent contractors (including but not limited to those listed above) who

received more than \$100,000 of compensation from the organization

23-7372183 Form 990 (2016) ARKANSAS TENNIS ASSOCIATION, INC. Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax (C) Unrelated Total revenue exempt function business under sections 512-514 revenue revenue 1a Federated campaigns 1a 4,676 b Membership dues 1b c Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 269,232 g Noncash contributions included in lines 1a-1f 273,908 h Total. Add lines 1a-1f Program Service Revenue Busn Code 653,107 2a TOURNAMENT AND LEAGUE PROGRAM 653,107 6,445 6,445 MEETINGS AND CONFERENCES f All other program service revenue g Total. Add lines 2a-2f 659,552 Investment income (including dividends, interest, 2,650 2,650 and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6a Gross rents **b** Less rental exps Rental inc or (loss) ▶ Net rental income or (loss) Gross amount from (i) Securities (II) Other sales of assets other than inventory Less cost or other basis & sales exps c Gain or (loss) ▶ d Net gain or (loss) 8a Gross income from fundraising events Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 **b** Less direct expenses ▶ c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses ▶ c Net income or (loss) from gaming activities 10a Gross sales of inventory, less 17,170 returns and allowances 9,730 b Less cost of goods sold

7,440

943,550

659,552

▶

Busn Code

2,650

7,440

7,440

11a b

> All other revenue Total. Add lines 11a-11d

c Net income or (loss) from sales of inventory

Total revenue. See instructions

Miscellaneous Revenue

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (B) (D) (A) Do not include amounts reported on lines 6b. Program service Fundraising Total expenses Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 9,611 9,611 individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 43,572 3,631 72,620 25,417 trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 241,430 67,283 39,269 347,982 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 15,293 675 14,618 Other employee benefits 7.182 27,147 34,329 Payroll taxes Fees for services (non-employees) Management Legal 7,672 1,560 6,112 Accounting C Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 670 670 12 Advertising and promotion 12,513 24,128 11,615 13 Office expenses 6,372 795 5,577 Information technology Royalties 48,149 3,369 51,518 16 Occupancy 3,073 653 545 4,271 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 27,246 27,246 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 12,000 12,000 Depreciation, depletion, and amortization 705 3,422  $\overline{4},127$ 23 Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 420 212,227 211,807 TOURNAMENT & LEAGUE PROGR 40,207 68,546 14,927 13,412 OTHER EXPENSES þ 8,009 7,489 15,498 REPAIRS & MAINTENANCE c 6,459 13,264 6,805 SUPPLIES 4,720 4,080 8,800 e All other expenses 281,269 56,857 936,174 598,048 Total functional expenses Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ following SOP 98-2 (ASC 958-720)

		Check if Schedule O contains a response or note to	o any l	ne in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			182,706	1	182,895
	2	Savings and temporary cash investments			330,718		331,463
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		Γ		4	
	5	Loans and other receivables from current and former office	ers, di	rectors,			
	1	trustees, key employees, and highest compensated employees					1
		Complete Part II of Schedule L				5	Ī
	6	Loans and other receivables from other disqualified perso	ns (as	defined under section	*******		
		4958(f)(1)), persons described in section 4958(c)(3)(B), as					
	]	sponsoring organizations of section 501(c)(9) voluntary er					1
tz		organizations (see instructions) Complete Part II of Sched		, j		6	Ī
Assets	7	Notes and loans receivable, net				7	
Ÿ	8	Inventories for sale or use		-		8	
	9	Prepaid expenses and deferred charges			300	9	300
	10a	Land, buildings, and equipment cost or					
		other basis Complete Part VI of Schedule D	10a	329,663			
	Ь	Less accumulated depreciation	10b	275,957	65,706	100	53,706
	11	Investments—publicly traded securities			171,546		179,957
	12	Investments—other securities See Part IV, line 11			190,730	12	201,557
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets				14	
_	15	Other-assets-See-Part-IV-line-11				-15-	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			941,706	16	949,878
	17	Accounts payable and accrued expenses			20,590	17	4,053
	18	Grants payable			18		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		-	20		
	21	Escrow or custodial account liability Complete Part IV of S	e D		21		
s	22	Loans and other payables to current and former officers, di				<u></u>	
abilities		trustees, key employees, highest compensated employees		·			<u></u>
abil		disqualified persons Complete Part II of Schedule L	,	Ī	f	22	İ
וַבַּי	23	Secured mortgages and notes payable to unrelated third pa	arties	-		23	
	24	Unsecured notes and loans payable to unrelated third parti				24	
	25	Other liabilities (including federal income tax, payables to re		thurd			
		parties, and other liabilities not included on lines 17-24) Co					
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			20,590	26	4,053
7		Organizations that follow SFAS 117 (ASC 958), check	here	X and			1,000
es		complete lines 27 through 29, and lines 33 and 34.			į	ŧ	Í
2	27	Unrestricted net assets			921,116	27	945,825
Balances	28	Temporarily restricted net assets				28	310,020
ᄝᅵ	29	Permanently restricted net assets				29	
틸		Organizations that do not follow SFAS 117 (ASC 958),	, chec	k here <b>▶</b> and		_ <u>-</u> -	
6		complete lines 30 through 34.	,		1	ļ	<u>:</u>
ets	30	Capital stock or trust principal, or current funds			j	30	
12 I		Paid-in or capital surplus, or land, building, or equipment fur	<del> </del>		31	<del></del>	
: I		Retained earnings, endowment, accumulated income, or other		ds		32	
Z [		Total net assets or fund balances			921,116	33	945,825
		Total liabilities and net assets/fund balances				34	949,878
_		·			_ , ,		,

Forn	n 990 (2016) ARKANSAS TENNIS ASSOCIATION, INC. 23-7372183				Pa	ge <b>12</b>	
Pa	art XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI					$\Box$	
1	Total revenue (must equal Part VIII, column (A), line 12)	1				550	
2	Total expenses (must equal Part IX, column (A), line 25)	_2		9.		<u> 174</u>	
3	Revenue less expenses Subtract line 2 from line 1	3				376 116	
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))						
5	Net unrealized gains (losses) on investments	_5			<u>17,</u>	<u> 333</u>	
6	Donated services and use of facilities	_6					
7	Investment expenses	_7_					
8	Prior period adjustments	_8_					
9	Other changes in net assets or fund balances (explain in Schedule O)	_ 9					
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line						
	33, column (B))	10		9	<u>45,</u>	<u>825</u>	
Pa	ert XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
			_		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						
	Schedule O						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				:		
	reviewed on a separate basis, consolidated basis, or both						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		L	2b	X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		-				
	separate basis, consolidated basis, or both			-		^	
	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		1	[			
	of the audit, 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		į				
	Schedule O			- 1			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in						
	the Single Audit Act and OMB Circular A-133?		L	3a		<u>X</u>	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			Ţ			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b			

Form **990** (2016)

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

### **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047 **2016** 

Open to Public

Department of the Treasury Internal Revenue Service Complete if the organization is described below

Attach to Form 990 or Form 990-EZ

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

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

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

• Section 501(c)(4), (5), or (6) organizations Complete Part III

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

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

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

Name of organization Employer identifica							
	ARKANSAS TENNIS ASS			23-73721			
	rt 1-A Complete if the organization is exem	<del></del>			<u> </u>		
1	Provide a description of the organization's direct and indirect	ct political campaign activities in	Part IV (see instructi	ons for			
_	definition of "political campaign activities")			<b>.</b> .			
2	Political campaign activity expenditures (see instructions)			▶ \$			
3	Volunteer hours for political campaign activities (see instruct 1-B Complete if the organization is exem		3)				
_ <u>E#</u>	Enter the amount of any excise tax incurred by the organiza	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<b>▶</b> \$			
2	Enter the amount of any excise tax incurred by the organization			<b>▶</b> \$			
3	If the organization incurred a section 4955 tax, did it file Form	·		•	Yes No		
_ კ_ 4a					Yes No-		
	If "Yes," describe in Part IV						
	† I-C Complete if the organization is exem	pt under section 501(c).	except section	501(c)(3).			
1	Enter the amount directly expended by the filing organization	·					
•	activities		•	<b>▶</b> \$			
2	Enter the amount of the filing organization's funds contribute	ed to other organizations for sect	tion	·			
_	527 exempt function activities	3		▶ \$			
3	Total exempt function expenditures Add lines 1 and 2 Ente	r here and on Form 1120-POL,					
	line 17b			▶ \$			
4	Did the filing organization file Form 1120-POL for this year?	,			Yes No		
5	Enter the names, addresses and employer identification nun	mber (EIN) of all section 527 poli	tical organizations to	which the filing			
	organization made payments. For each organization listed, e	enter the amount paid from the f	iling organization's fu	nds Also enter			
	the amount of political contributions received that were prom	nptly and directly delivered to a s	eparate political orga	inization, such			
	as a separate segregated fund or a political action committee	e (PAC) If additional space is no	eeded, provide inform	nation in Part IV			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political		
				filing organization's	contributions received and promptly and directly		
				funds If none, enter -0-	delivered to a separate		
					political organization If		
					none, enter -0-		
(1)							
(2)							
			<del> </del>		<del></del>		
(3)							
		<del></del>	<del></del>		<u> </u>		
(4)							
					<u> </u>		
(5)							
(e)		<del> </del>		·			
(6)							
		L					

Schedule C (Form 990 or 990-EZ) 2016 <b>ARKA</b>	NSAS TENNI	S ASSOCIATI	ON, INC.	23-73721	83 Page 2
Part II-A Complete if the organi section 501(h)).	zation is exem _l	ot under section 5	01(c)(3) and 1	filed Form 5768 (el	ection under
A Check ► ☐ if the filing organizat name, address, EIN.	expenses, and	share of excess lob	obying expend	ditures)	roup member's
B Check ▶ ☐ if the filing organizat	on checked box	A and "limited con	trol" provision:	s apply	
Limits on Lo (The term "expenditures"	bbying Expend means amount			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence pu	iblic opinion (grass r	oots lobbying)			
<b>b</b> Total lobbying expenditures to influence a	egislative body (dire	ect lobbying)			
c Total lobbying expenditures (add lines 1a	ınd 1b)				
d Other exempt purpose expenditures					
e Total exempt purpose expenditures (add li	nes 1c and 1d)		Ī		
f Lobbying nontaxable amount Enter the an	•	ing table in both			
columns		3			
If the amount on line 1e, column (a) or (b) is:	The lobbying no	ontaxable amount is:			
Not over \$500,000	20% of the amou				
Over \$500,000 but not over \$1,000,000		5% of the excess over \$500	0 000		<b>‡</b>
Over \$1,000,000 but not over \$1,500,000		0% of the excess over \$1,0			Į
Over \$1,500,000 but not over \$17,000,000		% of the excess over \$1,50			•
Over \$17,000,000	\$1,000,000	TO OT THE CAGEOG OVER \$ 1,00	1		
g Grassroots nontaxable amount (enter 25%		<del> </del>			
h Subtract line 1g from line 1a If zero or less	•		-		
i Subtract line 1f from line 1c If zero or less,	•		<u> </u>		
j If there is an amount other than zero on eit		did the organization file	Eorm 4720	•	
reporting section 4911 tax for this year?	iei iiile iii oi iiile ii,	did the organization me	1 01111 4720		Yes No
— —					i les i lito
		iging Period Under	•	•	
(Some organizations that ma		(h) election do not instructions for lir	-		olumns below.
<u> </u>	obbying Expend	itures During 4-Yea	r Averaging F	Period	
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount					
(150% of line 2a, column(e))			1		
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount			•		1
(150% of line 2d, column (e))			<u> </u>		
					· -

Schedule C (Form 990 or 990-EZ) 2016

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2016 ARKANSAS TENNIS ASSOCIATION, INC.	<u>23-737</u>	<u> 2183</u>	<u> </u>		Page
Part II-B Complete if the organization is exempt under section 501(c)(3) and has N	IOT filed Fo	orm 5	768		
(election under section 501(h)).	1	<del>а Т</del>	<del></del> ,	b)	
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a	''	<u>'</u>		
description of the lobbying activity	Yes	No	Am	ount	
During the year, did the filing organization attempt to influence foreign, national, state or local			······································		-
legislation, including any attempt to influence public opinion on a legislative matter or		1			
referendum, through the use of		1			
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total Add lines 1c through 1i		1			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912		-			
c If "Yes" enter the amount of any tax incurred by organization managers under section 4912		ļ	***************************************		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 5	01(c)(5), or	secti	on		
501(c)(6).				Т	Т
				Yes	No
-1 -Were substantially all (90% or-more) dues received nondeductible by members?			- 1	X	-
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	0		2	<del>  ^</del>	x
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior ye		ti	3		<u> </u>
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No				ic	
answered "Yes."	, OK (b) P	art III	-A, IIIIe J	, 15	
Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	ŀ	-+			
political expenses for which the section 527(f) tax was paid).					
a Current year	İ	2a			
b Carryover from last year	ŀ	2b			
c Total	<b>†</b>	2c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	T T	3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	ŀ				
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		1			
and political expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5			

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and

2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Part IV Supplemental Information (continued)

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on 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 awww.irs.gov/form990. Employer identification number

Open to Public Inspection

OMB No 1545-0047

A	RKANSAS TENNIS ASSOCIATION, INC.		23-7372183
	Organizations Maintaining Donor Advised Fun Complete if the organization answered "Yes" on F	ds or Other Similar Funds or Acc	
	Complete if the organization answered Tes Off	1 - 1	(b) Funds and other accounts
4	Total number at and of year	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year	les accès bald a decea advaced	
5	Did the organization inform all donors and donor advisors in writing that t		
•	funds are the organization's property, subject to the organization's exclusion but the organization inform all grantees, donors, and donor advisors in w	S	Yes No
6		•	
	only for charitable purposes and not for the benefit of the donor or donor conferring impermissible private benefit?	advisor, or for any other purpose	Yes No
D,	ert II Conservation Easements.		Tes NO
	Complete if the organization answered "Yes" on F	orm 990, Part IV, line 7	
1	Purpose(s) of conservation easements held by the organization (check a	ll that apply)	
	Preservation of land for public use (e g , recreation or education)	Preservation of a historically impor	tant land area
	Protection of natural habitat	Preservation of a certified historic s	structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conserve		on
	easement on the last day of the tax year		<ul> <li>Held at the End-of the Tax-Year-</li> </ul>
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic structure include	• •	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	s, and not on a	
_	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, released, extin	iguished, or terminated by the organization of	during the
	tax year ▶	1. 1 N	
4	Number of states where property subject to conservation easement is loc		
5	Does the organization have a written policy regarding the periodic monito violations, and enforcement of the conservation easements it holds?	ring, inspection, nandling of	☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of v	riolations, and enforcing conservation easen	
	<b>&gt;</b>	•	,
7	Amount of expenses incurred in monitoring, inspecting, handling of violati	ons, and enforcing conservation easements	during the year
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section 170(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation easemen	ts in its revenue and expense statement, an	nd
	balance sheet, and include, if applicable, the text of the footnote to the org	ganization's financial statements that descri	bes the
<b>*</b>	organization's accounting for conservation easements	listanical Transverse or Other Sim	silar Assats
Ta	rt III Organizations Maintaining Collections of Art, F Complete if the organization answered "Yes" on Fo		illiai Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not	· · · · · · · · · · · · · · · · · · ·	ce sheet
	works of art, historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherand	ce of
	public service, provide, in Part XIII, the text of the footnote to its financial s	statements that describes these items	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to re-	eport in its revenue statement and balance s	sheet
	works of art, historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherand	ce of
	public service, provide the following amounts relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		<b>▶</b> \$
2	If the organization received or held works of art, historical treasures, or other	her similar assets for financial gain, provide	the
	following amounts required to be reported under SFAS 116 (ASC 958) rel	ating to these items	
а	Revenue included on Form 990, Part VIII, line 1		<b>▶</b> \$
b	Assets included in Form 990, Part X		<b>▶</b> \$

		S TENNIS AS			INC.		1312183			Page_
	art III Organizations Maintaini							s (cont	inuec	1)
3	Using the organization's acquisition, access collection items (check all that apply)	sion, and other records	s, check a	ny of the follov	wing that are	a significa	nt use of its			
а	Public exhibition	d 🗌	Loan or	exchange pro	grams					
b	Scholarly research	е 📄	Other							
С	Preservation for future generations									
4	Provide a description of the organization's of	collections and explain	how they	further the org	ganization's e	xempt pur	pose in Part			
	XIII									
5	During the year, did the organization solicit	or receive donations of	f art, histo	orical treasures	s, or other sin	nlar		<u></u>	1	
	assets to be sold to raise funds rather than		of the	organization's	collection?				Yes	No.
Pa	Complete if the organization 990, Part X, line 21.	-	on For	m 990, Par	t IV, line 9,	or repo	rted an amoun	t on For	m	
1a	Is the organization an agent, trustee, custoo	dian or other intermedia	ary for co	ntributions or c	other assets r	ot				
	included on Form 990, Part X?		•						Yes	No
b	If "Yes," explain the arrangement in Part XII	I and complete the follo	owing tab	le						
								Am	ount	
Ç	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e	. <u></u>		
f	Ending balance						_1f _	·		
2a	Did the organization include an amount on F	Form 990, Part X, line 2	21, for es	crow or custod	dial account lia	ability?			Yes	No.
b	If "Yes," explain the arrangement in Part XII	Check here if the exp	olanation	has been prov	ided on Part	XIII				
Pa	rt V Endowment Funds.									
	Complete if the organization	on answered "Yes"	on For	<u>m 990, Par</u>	<u>t IV, line 10</u>		,			
		(a) Current year	— (ь	Prior year	(c) Two yes	ars back	- — (d)-Three-years ba	ck _   (e)	Four ye	ars back.
1a	Beginning of year balance		ļ							
b	Contributions		<b>}</b>		ļ <u>.</u>	<del></del> -	ļ <u>-</u>			
С	Net investment earnings, gains, and							ĺ		
	losses		ļ		ļ					
d	Grants or scholarships				ļ					
е	Other expenditures for facilities and									
	programs		ļ					_		
f	Administrative expenses		ļ							
g	End of year balance	L	<u>L</u>		<u> </u>		<u> </u>			
2	Provide the estimated percentage of the cur	rent year end balance	(line 1g, d	column (a)) he	ld as					
а	Board designated or quasi-endowment	%								
b	Permanent endowment ► %	<b>.</b>								
С	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse	ession of the organizati	on that ar	e held and ad	ministered for	r the				<del></del>
	organization by							_	Ye	s No
	(i) unrelated organizations							<u>  3a</u>	(i)	
	(ii) related organizations							3 <u>a</u>	(ii)	
b	If "Yes" on line 3a(ii), are the related organiz	ations listed as require	d on Sch	edule R?				3	<u>b                                    </u>	
4	Describe in Part XIII the intended uses of the		ment fun	ds						
Pa	rt VI       Land, Buildings, and Equ									
	Complete if the organization	n answered "Yes"	on For	<u>n 990, Part</u>	IV, line 11	a See I	Form 990, Part	X, line	10	
	Description of property	(a) Cost or other I	basis	(b) Cost or c	other basis	(c) A	Accumulated	(d) 8	look valu	ie
		(investment)		(othe	er)	d€	epreciation	<u>-</u>		
1a	Land									
b	Buildings			1	35,229		91,692		43	,537
С	Leasehold improvements									
d	Equipment			1	94,434		184,265		_10	,169
е	Other		1		1					
Catal	. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part X	, column	(B), line 10c)			▶[		53	,706

(a) Description of liability  (b) Book value  (c) Pedral income taxes  (c) Description of liability (b) Book value (c) Pedral income taxes (c) Description of liability (d) Description of liability (e) Book value (f) Pedral income taxes (g) Description of liability (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value	Part VII	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b See Form 990, Pa	rt X, line 12
Financial derivatives   Closely-held equity interests   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closely   Closel		•	(b) Book value	Y -	
Closely-held equal retirests	4) F			0000 01 010 07 70	a manor raiso
Other 1PT CD	-				
(A) (B) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C			201.557	MARKET	
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(F) (G) (H) (H) (D) must equal Form 990, Part X, col (B) line 12) ▶ 201, 557    Tant VIII (Investments—Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c See Form 990, Part X, line 13 (e) Method of valuation Cost or end of year market value (f) (ii) Method of valuation (f) (iii) Method of valuation (f) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation (f) (iii) Method of valuation	ii				
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Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the initial anization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.	Liability for	uncertain tax positions. In Part XIII, provide the text of the f	footnote to the organization's finan	cial statements that reports t	ne

<u>Sche</u>	dule D (Form 990) 2016 ARKANSAS TENNIS ASSOCIATION,	INC.	23-737218	3	Page <b>4</b>
Pa	art XI Reconciliation of Revenue per Audited Financial Statem	ents With F	Revenue per Retu	rn.	
	Complete if the organization answered "Yes" on Form 990, I	Part IV, line	12a		
1	Total revenue, gains, and other support per audited financial statements			1	970,612
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on investments	2a	<u>17,333</u>		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII )	2d	9,729		
е	Add lines 2a through 2d			2e	27,062
3	Subtract line 2e from line 1			3	943,550
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII )	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	943,550
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten	nents With	Expenses per Ret	turn.	
	Complete if the organization answered "Yes" on Form 990, F	Part IV, line	12a		
1	Total expenses and losses per audited financial statements			1	945,903
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
þ	Prior year adjustments	2b			
С	Other losses	2c		1	
d	Other (Describe in Part XIII )	2d	9,729	1	
е	Add lines 2a through 2d			2e	9,729
3	Subtract line 2e from line 1			3	936,174
_4 _	Amounts included on Form 990,-Part-IX,-line-25, but not-on line 1— — - — — — —			-  -	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1	
b	Other (Describe in Part XIII )	4b		- 1	
С	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	936,174
Pa	rt XIII Supplemental Information.				
rovi	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV,	lines 1b and 2b	o, Part V, line 4, Part X	, line	
	t XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide a.  ART XI, LINE 2D - REVENUE AMOUNTS INCLUDED	•		THER	Ł
CC	OST OF GOODS SOLD		\$		9,729
PA	ART XII, LINE 2D - EXPENSE AMOUNTS INCLUDE	D'IN FII	NANCIALS -	ОТНЕ	:R

9,729

COST OF GOODS SOLD

Schedule D (Form 990) 2016 ARKANSAS TENNIS .

Part XIII Supplemental Information (continued)

# SCHEDU (Form 99

SCHEDULEI	Grants and Other Assistance to Organizations,	OMB No
(Form 990)	Governments, and Individuals in the United States	00
	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	24
December of the Tennes	► Attach to Form 990.	Open to
Internal Revenue Service	▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.	luspe
Name of the organization	Employe	Employer identification number
7	ARKANSAS TENNIS ASSOCIATION, INC.	23-7372183
Part i Genera	General Information on Grants and Assistance	

Open to Public Inspection

2016 OMB No 1545-0047

3	Deep in eight annean records to substantiate the grants of assistance, the grantees engioning for the grants of assistance, and		iditis of day	אואנים וווב אומנונבבא	engionny ior me gran	ts or assistance, an	2	× × ×
the s 2 Desc	the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	nce of anitoring the use of	grant funds	in the United States				\$ <b>\</b>
Part II	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization an 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	mestic Organ that received n	izations a	and Domestic Go \$5,000. Part II ca	vernments. Con n be duplicated if	nplete if the organd	anization answ	tions and Domestic Governments. Complete if the organization answered "Yes" on Form e than \$5,000. Part II can be duplicated if additional space is needed
-	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if apolicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of noncash assistance	(h) Purpose of grant or assistance
£								
(2)								
(3)								
(4)								
(5)								
(9)								
(2)								
(8)								
(6)								
2 Ente 3 Ente	Enter total number of section 501(c)(3) and government organizations listed in Enter total number of other organizations listed in the line 1 table	organizations liste	d in the line	the line 1 table				<b>A A</b>
					-			

23-7372183	duals. Complete if the organization answered "Yes" on Form 990, Part IV, I
	plete if the orga
S TENNIS ASSOCIATION, INC	Indivi
AS TENNIS	sistance to Domestic
ARKANSAS T	Other Assist
-orm 990) (2016)	<b>Grants and</b>
Schedule I (	Part III

	Part III can be duplicated if additional space is needed	onal space is needed				
(a)	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of noncash assistance
		recipients	cash grant	noncash assistance	FMV, appraisal, other)	
1 ATHLE	1 ATHLETIC SCHOLARSHIPS	6	9,611	_	,	
4						
3				       		
4						•
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0						
7						
Part IV	Supplemental Information Provide the information required in Part I line 2 Part III column (b) and any other additional information	wide the information re	Anilired in Part I line	2 Part III column (b)	and any other additional	Information

# Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

ALL GRANTS OF THE ORGANIZATION ARE OF AN IMMATERIAL NATURE, THEREFORE,

SPECIAL MONITORING PROCEDURES ARE NOT DEEMED NECESSARY.

Schedule I (Form 990) (2016)

# SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2016

Open to Public

Department of the Treasury Internal Revenue Service Form 990 or 990-EZ or to provide any additional informati

► Attach to Form 990 or 990-EZ.

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

s.gov/form990 Inspection
Employer identification number

Name of the organization

ARKANSAS TENNIS ASSOCIATION, INC.

23-7372183

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT
OTHER EXPENSES TO PROMOTE AND DEVELOP THE GROWTH OF TENNIS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE EXECUTIVE DIRECTOR IS PROVIDED A COPY OF THE FORM 990, WHICH IS
REVIEWED AND SIGNED BY THE PRESIDENT. THERE IS NO FORMAL REVIEW PROCESS OF
THE FORM 990 BY THE BOARD.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE ASSOCIATION MAKES THEIR GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS
AVAILABLE TO THE GENERAL PUBLIC ON REQUEST, BY WRITING OR VISITING THE
ASSOCIATION'S OFFICE.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

COST OF GOODS SOLD

\$ 9,729

COST OF GOODS SOLD

\$ -9,729