

990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

► Do not enter social security numbers on this form as it may be made public Go to www.irs.gov/Form990 for instructions and the latest information 2017 Open to Public Inspection

OMB No 1545-0047

	<u>A</u>	For the 2017 c	alendar year, or tax year beginning , and ending			
	<u>B</u> (Check if applicable	C Name of organization	P	Employer	Identification number
		Address change	ARKANSAS TENNIS ASSOCIATION, INC.			
	$\overline{\Box}$	Name change	Doing business as		23-7	372183
	\equiv	•	Number and street (or P O box if mail is not delivered to street address)		Telephone	
	_	Initial return	2024 ARKANSAS VALLEY DRIVE, STE 302		201-	227-7611
		Final return/ terminated	City or town, state or province, country, and ZIP or foreign postal code	İ		
		Amended return	LITTLE ROCK AR 72212	G	Gross rece	erpts \$ 975,114
	\equiv		F Name and address of pnncipal officer	H(a) Is this a group r	otura for a	ubordinates? Yes X No
	⊔.	Application pending	DEANNA GARRETSON	n(a) is this a group i	eturn ioi st	ubordinates? Yes X No
			2024 ARKANSAS VALLEY DRIVE, STE 302	H(b) Are all subordir	nates inclu	ded? Yes No
		_	LITTLE ROCK AR 72212	If "No," atta	ach a list (see instructions)
	1	Tax-exempt status	501(c)(3) X 501(c) (4) ◀ (Insert no) 4947(a)(1) or 527 () 4			
	J	Website > W	WW.ARKTENNIS.COM	H(c) Group exempte	on number	•
	ĸ	Form of organization	X Corporation Trust Association Other ► L Y	ear of formation 19		M State of legal domicile AR
			immary			
			scribe the organization's mission or most significant activities	· ······		
		1	ROMOTE AND DEVELOP THE GROWTH OF TENNIS.			
	ည	10 1	NOTICE THE SEVERAL THE CHANTE OF TERMINE.			
	nai					
	Governance					
	တ္	2 Check th		of its net assets	1 - 1	10
	රේ		of voting members of the governing body (Part VI, line 1a)		3	12
	ties	ł	of independent voting members of the governing body (Part VI, line 1b)		4	12
	Activities &		nber of individuals employed in calendar year 2017 (Part V, line 2a)		5	26
	Act	6 Total nur	ber of volunteers (estimate if necessary)		6	354
		7a Total unr	elated business revenue from Part VIII, column (C), line 12		7a	2,718
		b Net unrel	ated business taxable income from Form 990-T, line 34		7b	-39,641
Q	2		-	Prior Year	200	Current Year
MAR 1 1 2019	<u> </u>		ons and grants (Part VIII, line 1h)	273,	$\overline{}$	311,799
-	e i		service revenue (Party) (inc 2)	659,		644,851
-	Š	10 Investme	nt in conje (Part VIII, column (A), lines 3, 4, and 7d) enues art VIII, column (A), lines 5, 55, 8c, 9c, 10c, and 11e)		650	2,506
α	. "	11 Other rev	enues Part VIII column (A), Jines 5, 58 Bc, 9c, 10c, and 11e)		440	2,718
₹		12 Total rev	enue exadd lines 8 thtough 11 (must egual Part VIII, column (A), line 12)	943,	550	<u>961,874</u>
		13 Grants a	nd similar amounts paid (Part IX, collumn (A), lines 1–3)	9,	611	23,959
		14 Benefits	paid to or (a) (G) (G) (F) (F) (A), (L)			Ó
Щ	Ø	15 Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)	470,	224	454,072
ş	ıse	16a Professio	nal fundraising fees (Part IX, column (A), line 11e)			0
SCANNED	xbenses	b Total fund	fraising expenses (Part IX, column (D), line 25) ▶ 37,412			
ပ္က	Ж		penses (Part IX, column (A), lines 11a–11d, 11f–24e)	456,	339	500,399
U)			enses Add lines 13–17 (must equal Part IX, column (A), line 25)	936,		978,430
		· ·	less expenses Subtract line 18 from line 12		376	-16,556
	e or		icas experises outstract line to from time 12	Beginning of Curren		End of Year
	Net Assets or Fund Balances	20 Total ass	ets (Part X, line 16)	949,	878	966,256
	Ass I Ba	21 Total liab	lities (Part X, line 26)		053	5,713
	E.E	22 Net asse	s or fund balances Subtract line 21 from line 20	945,		960,543
			gnature Block			
			perjury, I declare that I have examined this return, including accompanying schedules and statemen	ote and to the best of	f my kno	wledge and holiof it is
	tru	ie, correct, and co	property Declaration of preparer (other than officer) is based on all information of which preparer has	as any knowledge	i iliy kilo	wicage and belief, it is
			7		7	1-14-18
	Sig	<u>.</u>	Illam Janen		Date	7 7 7 7 0
	_	"' [DEANNA GARRETSON EXECU	TIVE DIRE		
	Hei			IIVE DIRE	CIOR	·
			ype or pnnt name and title	Date	1.	T desire
	D	. ```	preparer's name	Date	Check	LI PTIN
	Paid	DAVID	CHAPPELL Jan & Mayell			
		parer Firm's na		Firm's	s EIN 🕨	71-0598221
	Use	Only	401 W. CAPITOL, SUITE 501			
		Firm's add	ress LITTLE ROCK, AR 72201	Phon	e no	501-372-3112
	May	the IRS discus	this return with the preparer shown above? (see instructions)			X Yes No
		Paperwork Redu	ction Act Notice, see the separate instructions	Gas	5	Form 990 (2017)
	DAA			-1		

Part IV Ch	ecklist of Re	auired Sch	edules
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			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	ļ	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		,	ŀ
	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,			ļ
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,		l	ĺ
	Part III	_5	X	ļ
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			1
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6	ļ	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	<u> </u>	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	1 _	ĺ	
	complete Schedule D, Part III	8	<u> </u>	X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	1		}
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or		1	
4	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	1		x
4.5	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	-	_^
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	[ŀ
_	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	x	ł
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	1110	<u></u> -	
	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	12		
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110		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	1		
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? 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		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,			ļ
	fundraising, business, investment, and program service activities outside the United States, or aggregate	1		
	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		i	l
	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	Į	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			۱
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
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	ł	X

			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			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		_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		X
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		
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			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	ļ		
	If "Yes," complete Schedule L, Part I	25b		X
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 "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,			
	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		Х
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
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		Х
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		Х
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			_
	19? Note All Form 990 filers are required to complete Schedule O	38	х	
	vee more are required to complete outside to			

Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
1.	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	F	Yes	No
1a h	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 15 0		-	
b	Did the organization comply with backup withholding rules for reportable payments to vendors and			
С	reportable gaming (gambling) winnings to prize winners?	1c	x	İ
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
2a	Statements, filed for the calendar year ending with or within the year covered by this return 2a 26	1	Ī	Ė
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X	
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	_ 41	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	x	İ
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	100		
	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 FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)			1
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?	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)			ţ
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		•	İ
	and services provided to the payor?	7a		L
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 to file Form 8282?	7c		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year			ŧ
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		├
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		-
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		-
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			F
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		\vdash
10	Section 501(c)(7) organizations. Enter	"		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		;	
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			ŀ
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)		•	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	•	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			ļ
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		L

Form 990 (2017) ARKANSAS TENNIS ASSOCIATION, INC. 23-7372183 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management

					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	12			
	If there are material differences in voting rights among members of the governing body, or			Ì		ŀ
	if the governing body delegated broad authority to an executive committee or similar					
	committee, explain in Schedule O			ļ		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	12			
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		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			_ 5		Х
6	Did the organization have members or stockholders?			6		<u>x</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			- 1	}	
	one or more members of the governing body?			7a		X
p	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 to	y the fo	llowing			
a	The governing body?			_8a	X	
p	Each committee with authority to act on behalf of the governing body?			8b	Х	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			ĺ		
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	<u></u>	<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Inter	<u>nal R</u>	<u>əvenue</u>	Code)		r
					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,			40.	- T	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	X	v
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the) torm		11a		X
b 42-	Describe in Schedule O the process, if any, used by the organization to review this Form 990			1	х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	0_	4-0	12a		x
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	COULIC	ts /	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			40-		.
42	describe in Schedule O how this was done			12c	x	X
13	Did the organization have a written whistleblower policy?			13	X	
14 15	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			14		
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					1
-	The organization's CEO, Executive Director, or top management official			150	1	x
b	Other officers or key employees of the organization			15a 15b	 	X
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			130		
16≃	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			ŀ		
104	with a taxable entity during the year?			16a		x
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			100		
•	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				L	
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(or	:)(3)s o	nly)			
	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)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	policy,	and			
	financial statements available to the public during the tax year	-				
20	State the name, address, and telephone number of the person who possesses the organization's books and records	•				
DI	EANNA GARRETSON 2024 AR VALLEY, STE 302					
L	TTLE ROCK AR 722:	L2	ŗ	501-22	7-7	611

Form 990 (2017	ARKANSAS TENNIS ASSOCIATION, INC. 23-7372183	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, ar	nd
	Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	📙
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key 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

(A) Name and Title	(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) BRAD PHELPS		T							
	0.00	1							
VICE-PRESIDENT	0.00	X	١.	X			0	0	0
(2) BOB WAGSTAFF									
	0.00	1				1 [
DIRECTOR	0.00	X					0	0	0
(3) TAYLOR DODDS		1							
	0.00								
DIRECTOR	0.00	X				1 1	0	o	0
(4) BOB LUCKY									
	0.00	1		i		1			
DIRECTOR	0.00	X					0	0	0
(5) CRYSTAL NOBLE		T^{-}	Γ						
	0.00								
PRESIDENT	0.00	X		X	Ĺ		0	0	0
(6) JENIFER TUCKER									
	0.00	1		l		1			
VICE-PRESIDENT	0.00	X	_	X			0	0	0
(7) JOSEPH MURPHY		1							
	0.00								
DIRECTOR	0.00	X			<u> </u>	<u> </u>	0	0	0
(8) GARY JONES						IT			
	0.00	1	ŀ	1	1	1 1		:	
VICE-PRESIDENT	0.00	X		X			0	0	0
(9) VANESSA ROPER				Γ					
	0.00	1							
DIRECTOR	0.00	X	_	l	l		0	0	0
(10) KAMI TUCKER									
	0.00	1	}			1 1	1		
VICE-PRESIDENT	0.00	x		X		1	0	o	0
(11) TERESA KILLOUGH			_		-				
	0.00								
DIRECTOR	0.00	X	l	1	l	1 1	0	O	0

			Yes	_ N(
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3_		Х
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			
	ındıvıdual	4		X
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		X

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

Section B. Independent Contractors

compensation from the organization. Report compensation for the cale	endar year ending with or within the organization's tax year	
(A) Name and business address	(B) Description of services	(C) 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 ▶

Form **990** (2017)

Part VIII Statement of Revenue

		Check	if Schedule (O conta	ains a r	esponse o	r note to any line i	n this Part VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
, ,	10	Federated cam	naigne	1a'			, 1771	1 1 11 1 11	emer diff.	
듩흽						4,734	1		į	
5 2		Membership di		1b		4,734	-		1	
A,		Fundraising ev		1c						
돌	d	Related organi	zations	1d					1	
S,E	е	Government grants ((contributions)	1e					1	
S	f	All other contribution		ł l					1	
		and similar amounts	not included above	1f		307,065			1	
	g	Noncash contribution	ns included in lines 1a-	1f \$		1	1		1	
Contributions, Giffs, Grants and Other Similar Amounts	h	Total. Add line	s 1a-1f			▶	311,799	·		
		<u>-</u>				Busn Code			[
ē	2a	TOURNAM	ENT AND LEAG	UE PRO	GRAM		638,697	638,697		
Ş.	b		S AND CONFER				6,154	6,154		
8	c	•								
٥	d									
SE	e									· · · · · · · · · · · · · · · · · · ·
ga	-	All other progr	am service rever	110						
Program Service Revenue				iue		•	644,851			
\dashv	g		ome (including o	luudonda	interest		011,001			
٠	3	and other simil		ii viu ei iu s	s, micresi	" <u> </u>	2,506			2,506
			•	ovomnt	hand pro	aboods	2,300			
	4		vestment of tax-	exempl	bona pro	lceeus P				
	5	Royalties	(i) Real		/u\ D	ersonal				
	٥-	0	(i) Real	+	(11)	ersonal				
		Gross rents								
	b	Less rental exps								
	С	Rental inc or (loss)			_				1	
ĺ	d 7a	Net rental inco Gross amount from			4.3	015				
		sales of assets	(i) Secunties		(11)	Other				
ı		other than inventory								
	b	Less cost or other					:			
		basis & sales exps]	
	С	Gain or (loss)							†	
- 1	d	Net gain or (los		Г		▶.				
ا <u>ب</u> و	8a	Gross income fro	om fundraising ever	nts			=			
E I		(not including \$								
Š			eported on line 1c)							
<u>ا</u> يٰ		See Part IV, line	18	a					1	
Other Revent		Less direct ex		b						
٦	С	Net income or	(loss) from fund	raising <u>e</u>	vents	<u> </u>				
	9a	Gross income fro	om gaming activitie	s						
		See Part IV, line		a						
	þ	Less direct ex	penses	b∟						
	С	Net income or	(loss) from gam	ing activ	ities	<u> </u>				······································
	10a	Gross sales of	inventory, less							
		returns and all	owances	a		15,958		-		
	b	Less cost of g	oods sold	ьL		13,240			1	
	С_	Net income or	(loss) from sale:	of inve	ntory	<u> </u>	2,718		2,718	······································
[Mis	cellaneous Revenue			Busn Code				
	11a									
	b							_	_	<u></u> -
	С									
	d	All other reven	ue			L				
	е	Total Add line	s 11a-11d			>				
	12	Total revenue	e. See instruction	ıs		>	961,874	644,851	2,718	2,506

Form 990 (2017)

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) Program service (D) Fundraising (C) Do not include amounts reported on lines 6b, Management and Total expenses 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 23,959 23,959 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, 42,658 71,097 24,884 3,555 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 61,350 23,947 339,392 254,095 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 474 11,151 11,625 Other employee benefits 24,665 7,293 31,958 Payroll taxes 10 Fees for services (non-employees) Management b Legal 7,476 1,526 5,950 c Accounting d 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) 349 349 Advertising and promotion 12 15,226 12,166 27,392 Office expenses 13 920 4,051 4,971 Information technology 15 Royalties 59,673 3,415 63,088 16 Occupancy 2,934 5,147 1,096 1,117 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 30,446 30,446 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 7,211 7,211 Depreciation, depletion, and amortization 22 4,501 1,526 2,975 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) 187,728 94 TOURNAMENT & LEAGUE PROGR 187,822 8,525 128,324 119,799 REPAIRS & MAINTENANCE b 15,243 8,451 6,792 SUPPLIES С 10,785 922 1,070 8,793 OTHER EXPENSES d 5,962 1,682 7,644 e All other expenses 207,925 733,093 37,412 978,430 Total functional expenses. Add lines 1 through 24e 25 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)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year · End of year 182,895 317,351 Cash-non-interest bearing 331,463 Savings and temporary cash investments 2 191.956 Pledges and grants receivable, net 3 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 8 300 300 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 10a 329,663 other basis Complete Part VI of Schedule D 283,174 53,706 10c 46,489 10b b Less accumulated depreciation 179,957 197,230 11 11 Investments—publicly traded securities 201,557 212,930 12 Investments—other securities See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 949,878 966,256 16 16 Total assets Add lines 1 through 15 (must equal line 34) 4,053 5,713 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 4,053 5,713 Total liabilities. Add lines 17 through 25 26 X and Organizations that follow SFAS 117 (ASC 958), check here Vet Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 945,825 27 27 960,543 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 945,825 960,543 33 Total net assets or fund balances 966,256 949,878 Total liabilities and net assets/fund balances

Form 990 (2017)

orm	990 (2017) ARKANSAS TENNIS ASSOCIATION, INC. 23-7372183			Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
_	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		961,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		978,	430
3	Revenue less expenses Subtract line 2 from line 1	3		-16,	556
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		945,	825
5	Net unrealized gains (losses) on investments	5		31,	274
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_		960,	543
Pa	rt 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				ŀ
	Schedule O		<u>.</u>		ļ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	<u> </u>	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				1
	reviewed on a separate basis, consolidated basis, or both		}		
	Separate basis Consolidated basis Both consolidated and separate basis				1
b	Were the organization's financial statements audited by an independent accountant?		2b	X	ļ
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		į		ł
	separate basis, consolidated basis, or both				
	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				Ì
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	<u> </u>	X
	If the organization changed either its oversight process or selection process during the tax year, explain in				Ĭ
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a	4	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required guidt or guidte, evoluin why in Schodule O and describe any stone taken to undergo such guidte		1 3h	. 1	ì

Form 990 (2017)

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below Attach to Form 990 or Form 990-EZ

► Complete if the organization is described below

Attach to Form 990 or Form

Go to www irs gov/Form990 for instructions and the latest information

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

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

• ;	Section 501(c)(4), (5), or (6) organizations. Complete Part III				
	e of organization	<u> </u>		Employer ident	ification number
	ARKANSAS TENNIS ASS	OCIATION, INC.		23-73721	83
Pa	rt I-A Complete if the organization is exen	npt under section 501(c	or is a section	n 527 organizatio	n.
1	Provide a description of the organization's direct and indirect	ct political campaign activities in	Part IV (see instru	ctions for	
	definition of "political campaign activities")				
2	Political campaign activity expenditures (see instructions)			▶ \$	
3	Volunteer hours for political campaign activities (see instruc	ctions)			
Рa	rt I-B Complete if the organization is exen	npt under section 501(c)(3).		
1	Enter the amount of any excise tax incurred by the organization	ation under section 4955		▶ \$	
2	Enter the amount of any excise tax incurred by organization	n managers under section 4955		▶ \$	
3	If the organization incurred a section 4955 tax, did it file For	m 4720 for this year?			Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV				
Pa	rt I-C Complete if the organization is exen	npt under section 501(c), except section	on 501(c)(3).	
1	Enter the amount directly expended by the filing organization	n for section 527 exempt function	n		
	activities			▶ \$	
2	Enter the amount of the filing organization's funds contribute	ed to other organizations for sec	tion		
_	527 exempt function activities			▶ \$	
3	Total exempt function expenditures Add lines 1 and 2 Ente	er 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 nu	• • •	-	-	
	organization made payments. For each organization listed,				
	the amount of political contributions received that were pror	• •	•	-	
	as a separate segregated fund or a political action committee		T	1	(a) Amount of polyhood
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none enter -0-	promptly and directly
					delivered to a separate political organization
				ļ	If none, enter -0-
(1)					
/				İ	
(2)					
. ,					
(3)					
	_				
4)					
5)					
_					
6)					
			1		

Schedyle C (F	、 orm 990 or 990-EZ) 2017 ARK	NSAS TENNIS	S ASSOCIATIO	ON, INC.	23-737218	83 Page 2
Part II-A	Complete if the organ section 501(h)).	ization is exemp	t under section 5	01(c)(3) and	l filed Form 5768 (e	
A Check		n belongs to an affil	iated group (and list	ın Part IV eac	ch affiliated group mem	iber's name,
	address, EIN, expens	es, and share of exc	cess lobbying expend	ditures)		
B Check	▶ ☐ if the filing organiza	tion checked box	A and "limited con	trol" provisio	ns apply	
		bbying Expendi			(a) Filing	(b) Affiliated
	(The term "expenditures	' means amounts	paid or incurred.)		organization's totals	group totals
	bbying expenditures to influence p	, ,	,			
	bbying expenditures to influence a		t lobbying)		·	
	bbying expenditures (add lines 1a	and 1b)				
	xempt purpose expenditures					
	kempt purpose expenditures (add					
-	ng nontaxable amount. Enter the a	mount from the following	ng table in both			
column			<u> </u>	 -		
	nount on line 1e, column (a) or (b) i		ntaxable amount is			
	r \$500,000	20% of the amour				1
	00,000 but not over \$1,000,000		% of the excess over \$50			1
	,000,000 but not over \$1,500,000		% of the excess over \$1,0 6 of the excess over \$1,50			
	,500,000 but not over \$17,000,000 7,000,000	\$1,000,000	o of the excess over \$1,50	00,000		
	oots nontaxable amount (enter 25%					
•	at line 1g from line 1a. If zero or les	•				
	at line 1f from line 1c. If zero or less	•				
	is an amount other than zero on e	•	did the organization file	Form 4720		
	g section 4911 tax for this year?					☐Yes ☐ No
		4-Vear Average	ing Period Under s	ection 501/h	١	
	(Some organizations that ma	_	•		•	umns below
	(Come organizations that in	•	instructions for line	-		annio Bolow.
_						
		Lobbying Expendit	tures During 4-Year	Averaging F	Period	<u> </u>
Cale	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 201	6 (d) 2017	(e) Total
2a Lobbyir	ng nontaxable amount ,					
b Lobbyir	ig ceiling amount			1]
(150%	of line 2a, column (e))					
c Total lo	bbying expenditures					
d Grassro	oots nontaxable amount					
e Grassro	oots ceiling amount			}		
(150%	of line 2d, column (e))	····				

Schedule C (Form 990 or 990-EZ) 2017

f Grassroots lobbying expenditures

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed F (election under section 501(h)).	orm	5768		<u> </u>
	(2	3)	(b)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity Yes	No	Amo	unt	
		110	Aiilo		
1	During the year, did the filing organization attempt to influence foreign, national, state or local				
	legislation, including any attempt to influence public opinion on a legislative matter or				
	referendum, through the use of				
a	 	ļ- <u>-</u>	•		
b					
C					
d					
e			_ _		
f	7 0 1				
g					
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
	Total Add lines 1c through 1i				
-	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
_	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or	or se	ction		
. ~	501(c)(6).		••••		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	Х	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	Х	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		3		X
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), c	or se	ction		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b)	Part	III-A, line 3	, is	
	answered "Yes."				
1	Dues, assessments and similar amounts from members	1_			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of				
	political expenses for which the section 527(f) tax was paid).				
	Current year	_2a_			
b	Carryover from last year	2b			
С	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying				
	and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5	<u> </u>		
	t IV Supplemental Information de 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.				

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

Supplemental Information (continued)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer Identification number

Δ	RKANSAS TENNIS ASSOCIATION, INC.		23-7372183	
	ort ! Organizations Maintaining Donor Advised Fu			
•	Complete if the organization answered "Yes" on	Form 990, Part IV, line 6		
		(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			
5	Did the organization inform all donors and donor advisors in writing that	the assets held in donor advised		
	funds are the organization's property, subject to the organization's exclu	sive legal control?	Yes	No
6	Did the organization inform all grantees, donors, and donor advisors in v	writing that grant funds can be used		
	only for charitable purposes and not for the benefit of the donor or dono	r advisor, or for any other purpose		
	conferring impermissible private benefit?		Yes	No_
Pa	ert II Conservation Easements.	Farm 000 Ba (D/ b) a 7		
	Complete if the organization answered "Yes" on			
1	Purpose(s) of conservation easements held by the organization (check			
	Preservation of land for public use (e g , recreation or education)	Preservation of a historically importa		
	Protection of natural habitat	Preservation of a certified historic str	ucture	
_	Preservation of open space	and a second sec		
2	Complete lines 2a through 2d if the organization held a qualified conser- easement on the last day of the tax year	vation contribution in the form of a conservation	Held at the End of the T	
	Total number of conservation easements		2a	ax real
a	Total acreage restricted by conservation easements		2b	
d C	Number of conservation easements on a certified historic structure including	ided in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/0			
u	historic structure listed in the National Register	o, and not on a	2d	
3	Number of conservation easements modified, transferred, released, ext	inquished or terminated by the organization du	L	
·	tax year ▶			
4	Number of states where property subject to conservation easement is k	ocated >		
5	Does the organization have a written policy regarding the periodic monit			
	violations, and enforcement of the conservation easements it holds?		Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of	violations, and enforcing conservation easeme	ents during the year	
	>			
7	Amount of expenses incurred in monitoring, inspecting, handling of violation	ations, and enforcing conservation easements	during the year	
	▶ \$			
8	Does each conservation easement reported on line 2(d) above satisfy the	ne 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 easemed			
	balance sheet, and include, if applicable, the text of the footnote to the consequence of	organization's financial statements that describe	es the	
- h	organization's accounting for conservation easements rt III Organizations Maintaining Collections of Art	Historical Transuras or Other Sin	ailar Accote	
76	rt 掛 Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" on	Form 990. Part IV. line 8	mai Assets.	
12	If the organization elected, as permitted under SFAS 116 (ASC 958), no		e sheet	
ıα	works of art, historical treasures, or other similar assets held for public 6	-		
	public service, provide, in Part XIII, the text of the footnote to its financia		•	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to		eet	
	works of art, historical treasures, or other similar assets held for public e	·		
	public service, provide the following amounts relating to these items			
	(i) Revenue included on Form 990, Part VIII, line 1		> \$	
	(ii) Assets included in Form 990, Part X		▶ \$	
2	If the organization received or held works of art, historical treasures, or	other similar assets for financial gain, provide t	ne	
	following amounts required to be reported under SFAS 116 (ASC 958) r	elating to these items		
а	Revenue included on Form 990, Part VIII, line 1		> \$	
b	Assets included in Form 990, Part X		▶ \$	

Total. Add lines 1a through 1e (Column (d) must d	equal Form 990, Part X	(, column (B), line 10	Oc)	•	46,489
d Equipment e Other			-01/101	100,232	0,202
c Leasehold improvements			194,434	188,232	6,202
b Buildings	<u> </u>		135,229	94,942	40,287
1a Land			12E 000	04 040	40.000
	(investment)		(other)	depreciation	
Description of property	(a) Cost or other t		or other basis	(c) Accumulated	(d) Book value
Complete if the organization	•	' on Form 990. F	Part IV, line 1	1a See Form 990. P	art X, line 10
Part VI Land, Buildings, and Equ		ment lunus			
b If "Yes" on line 3a(ii), are the related organiz					[_3b
(ii) related organizations	akaaa hata da	d 111 045 1410 1 D0			3a(II)
(i) unrelated organizations					3a(ı)
organization by					Yes No
3a Are there endowment funds not in the posse	ssion of the organizati	on that are held and	administered fo	r the	
The percentages on lines 2a, 2b, and 2c sho	ould equal 100%				
c Temporarily restricted endowment ▶	%				
b Permanent endowment ► %					
a Board designated or quasi-endowment ▶	"" "" "" "" "" "" "" "" "" "" "" "" ""	(mic rg, column (d))	nolu as		
g End of year balance2 Provide the estimated percentage of the cur	rent year and halance	(line 1a, column (a))	held as		
f Administrative expenses	 				
programs					
e Other expenditures for facilities and					
d Grants or scholarships	,				
losses	<u> </u>				
c Net investment earnings, gains, and					
b Contributions					
1a Beginning of year balance	1-1 200000 1000	(2))22.	1-, 10)0	127 771100 70010 1	(a). ca. jours such
Complete if the organization	(a) Current year	(b) Pnor year	(c) Two ye		pack (e) Four years back
Part V Endowment Funds. Complete if the organization	on answered "Yes'	on Form 990 F	Part IV Jine 1	10	
b If "Yes," explain the arrangement in Part XIII Part V Endowment Funds.	Check here if the exp	lanation has been p	rovided on Part	XIII	
2a Did the organization include an amount on F				•	Yes No
f Ending balance				1f	<u> </u>
 Distributions during the year 				1e	
d Additions during the year				1d	
c Beginning balance				1c	
• • • • • • • • • • • • • • • • • • • •	,	Ü			Amount
b If "Yes," explain the arrangement in Part XIII	and complete the follo	wing table			
1a Is the organization an agent, trustee, custod included on Form 990, Part X?	ian oi other intermedia	ry tot contributions (n omer assets f	iot	Yes No
990, Part X, line 21	on or other arts are	a, for octubulant	a other as into		
Complete if the organization	on answered "Yes	" on Form 990, F	Part IV, line 9	a, or reported an amo	unt on Form
Part IV Escrow and Custodial A					
assets to be sold to raise funds rather than t		•			Yes No
5 During the year, did the organization solicit of	or receive donations of	art, historical treasu	res, or other sin	nılar	
4 Provide a description of the organization's c XIII	onections and explain f	low they fulfile the	organizalion s e	verilht bailbase in Lait	
c Preservation for future generations	allastions and avalous t	and the section of the		ware to a contract of Dark	
b Scholarly research	e [_]	Other			
a Public exhibition	d 🔲	Loan or exchange p	orograms		
collection items (check all that apply)					
3 Using the organization's acquisition, access					
Part III Organizations Maintainir					
Schedule D (Form 990) 2017 AKKANSAS	TENNIS ASS	SOCIATION,	INC.	23-/3/2183	Page 2

			11b See Form 990, Part X, line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
) Financial d			
•	Id equity interests		
	PI CD	212,930	MARKET
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	(b) must equal Form 990, Part X, col. (B) line 12.) ▶	212,930	
Part VIII	Investments—Program Related.		
	Complete if the organization answered "Yes	s" on Form 990 Part IV line	11c See Form 990 Part X line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation
	, , ,	1	Cost or end-of-year market value
1)			
2)			
3)			
4)			
5)			
6)			
7)	· 		
8)			
9)			
	(b) must equal Form 990, Part X, col (B) line 13) ▶		
Part IX	Other Assets.		
· uit ix	Complete if the organization answered "Yes	" on Form 990 Part IV line	11d See Form 990 Part X line 15
	(a) Description		(b) Book value
(1)			(2) 330 (3)
2)			
3)			
4)			
51			
6)			
6) 7)			
6) 7) 8)			
6) 7) 8) 9)	(h) must aqual Form 000 Part V col (R) line 15)		
6) 7) 8) 9) otal. (Column	(b) must equal Form 990, Part X, col (B) line 15)		>
(5) (6) (7) (8) (9) otal. (Column Part X	Other Liabilities.	" on Form 990. Part IV. line	11e or 11f See Form 200 Part V
6) 7) 8) 9) otal. (Column	Other Liabilities. Complete if the organization answered "Yes	" on Form 990, Part IV, line	11e or 11f See Form 990, Part X,
6) 7) 8) 9) otal. <i>(Column</i>	Other Liabilities. Complete if the organization answered "Yes line 25		11e or 11f See Form 990, Part X,
6) 7) 8) 9) otal. (Column Part X	Other Liabilities. Complete if the organization answered "Yes line 25 (a) Description of trability	s" on Form 990, Part IV, line	11e or 11f See Form 990, Part X,
6) 77) 8) 9) stal. (Column Part X	Other Liabilities. Complete if the organization answered "Yes line 25		11e or 11f See Form 990, Part X,
6) 7) 8) 9) stal. (Column Part X	Other Liabilities. Complete if the organization answered "Yes line 25 (a) Description of trability		11e or 11f See Form 990, Part X,
6) 7) 8) 9) otal. (Column Part X 1) Federal in 2) 3)	Other Liabilities. Complete if the organization answered "Yes line 25 (a) Description of trability		▶ 11e or 11f See Form 990, Part X,
6) 7) 8) 9) stal. (Column Part X 1) Federal in 2) 3)	Other Liabilities. Complete if the organization answered "Yes line 25 (a) Description of trability		▶ 11e or 11f See Form 990, Part X,
6) 7) 8) 9) otal. (Column Part X 1) Federal in 2) 3) 4)	Other Liabilities. Complete if the organization answered "Yes line 25 (a) Description of trability		11e or 11f See Form 990, Part X,
6) 7) 8) 9) otal. (Column Part X 1) Federal in 2) 3) 4) 5)	Other Liabilities. Complete if the organization answered "Yes line 25 (a) Description of trability		11e or 11f See Form 990, Part X,
6) 7) 8) 9) otal. (Column Part X 1) Federal in 2) 3) 4) 5) 6)	Other Liabilities. Complete if the organization answered "Yes line 25 (a) Description of trability		11e or 11f See Form 990, Part X,
6) 7) 8) 9) otal. (Column Part X 1) Federal in 2) 3) 4) 5) 6) 7) 8)	Other Liabilities. Complete if the organization answered "Yes line 25 (a) Description of trability		11e or 11f See Form 990, Part X,
6) 7) 8) 9) otal. (Column Part X 1) Federal in 2) 3) 4) 5) 6) 7) 8)	Other Liabilities. Complete if the organization answered "Yes line 25 (a) Description of trability		▶ 11e or 11f See Form 990, Part X,

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

X

Part XIII Supplemental Information.

Amounts included on Form 990, Part IX, line 25, but not on line 1
 Investment expenses not included on Form 990, Part VIII, line 7b

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

e Add lines 2a through 2d

Subtract line 2e from line 1

b Other (Describe in Part XIII)c Add lines 4a and 4b

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 X - FIN 48 FOOTNOTE

THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(4)

OF THE INTERNAL REVENUE CODE AND APPLICABLE STATE LAW AND IS CLASSIFIED AS

OTHER THAN A PRIVATE FOUNDATION.

<u>4a</u> 4b

THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES

ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO

BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS.

UNDER THAT GUIDANCE, THE ASSOCIATION MAY RECOGNIZE THE TAX BENEFIT FROM AN

UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX

POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES BASED ON

THE TECHNICAL MERITS OF THE POSITION. EXAMPLES OF TAX POSITIONS INCLUDE THE

13,240

978,430

978,430

2e

3

<u>4c</u> 5

TAX-EXEMPT STATUS OF THE ASSOCIATION AND VARIOUS POSITIONS RELATED TO THE POTENTIAL SOURCES OF UNRELATED BUSINESS TAXABLE INCOME (UBIT). THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THERE WERE NO UNRECOGNIZED TAX BENEFITS IDENTIFIED OR RECORDED AS LIABILITIES FOR THE YEAR ENDED DECEMBER 31, 2017. ALL TAX RETURNS FROM 2014 FORWARD ARE OPEN AND SUBJECT TO EXAMINATION.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER \$ 14,282 COST OF GOODS SOLD

PART XII, LINE 2D - EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER \$ COST OF GOODS SOLD 14,282

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

2017	Open to Public Inspection

OMB No 1545-0047

► Go to www irs gov/Form990 for the latest information.

Employer identification number 23-7372183 INC. ARKANSAS TENNIS ASSOCIATION, General Information on Grants and Assistance Name of the organization Parti

X Yes	es" on Form	(h) Purpose of grant or assistance								
	ization answered "Ye is needed	(g) Description of noncash assistance								
assistance, and	lete if the orgar	(f) Method of valuation (book, FMV, appraisal, other)								
bility for the grants or a	rernments. Comp	(e) Amount of non- cash assistance								
ince, the grantees' elig he United States	nd Domestic Gov \$5,000 Part II car	(d) Amount of cash grant								
its or assista	zations a	(c) IRC section (if applicable)								
amount of the grang?? oring the use of gra	mestic Organithat received m	(b) EIN								
Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	(a) Name and address of organization or government								
1 Does the sel	त्र	4	(E)	(2)	(3)	(4)	(5)	(9)	(2)	(8)

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

6)

Schedule I (Form 990) (2017)

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

Grants and Other Assistance to Domestic Individuals. Complete If the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be dublicated if additional space is needed 23-7372183 Schedule I (Form 990) (2017) ARKANSAS TENNIS ASSOCIATION, INC. Part III Grants and Other Assistance to Domoctic Individuals Committee

	Part III can be duplicated if additional space is needed	ional space is needed				
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(f) Description of noncash assistance
		recipients	cash grant	noncash assistance	FMV, appraisal, other)	
1 ATHLE	1 ATHLETIC SCHOLARSHIPS	14	23,959			:
2						
ო						
4						
ς.						
9						
7						
Partiv	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	vide the information rec	luired in Part I, line 2,	Part III, column (b),	and any other additional in	Iformation

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 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

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information

2017

OMB No 1545-0047

Öpen to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ARKANSAS TENNIS ASSOCIATION, INC.

Employer identification number 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

\$ 14,282

COST OF GOODS SOLD

\$ -14,282