m 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.

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

OMB No. 1545-0047

2021

Open to Public

Open to Public Inspection

A F	or th	e 202	1 calendar year, or tax year beginning	and ending	<u></u>		
_			C Name of organization		D Employer ide	ntification number	
Вс	heck if ap	oplicable:	USTA FOUNDATION INCORPORATED				
	Addre		Doing Business As		13-3782	331	
	7 7	change	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone nu		
	+	return	70 W RED OAK LANE		(914)69	6-7000	
	Termi		City or town, state or province, country, and ZIP or foreign postal code		(311)03	0 7000	
	Amen		WHITE PLAINS, NY 10604		G Gross receipts	s\$ 1 <i>1</i> 7	36,394.
		cation	F Name and address of principal officer: KATHLEEN WU		H(a) Is this a group	==,,,	es X No
	pendi	ng	Idilibbili Wo		subordinates?	· H ·	es No
_	Tau au		70 W RED OAK LANE, WHITE PLAINS, NY 10604	507	H(b) Are all subordin	n a list. (see instruction	
÷		empt st		or 527		•	5)
<u></u>			WWW.USTAFOUNDATION.COM		H(c) Group exempt		
			ization: X Corporation Trust Association Other	L Year of for	mation: 1994 M S	state of legal domic	ile: NY
P	art I	•	mmary				
	1		describe the organization's mission or most significant activities: _ TO BR			N TOGETHER	L TO
Governance			NGE LIVES, WITH PARTICULAR EMPHASIS ON UNDER-R		YOUTH.		
.ua			NG THIS POWERFUL COMBINATION, WE HELP SERVE UP				
Š			this box 🕨 🔛 if the organization discontinued its operations or disposed		1		
	3		er of voting members of the governing body (Part VI, line 1a)			3	15
- დ თ	4	Numb	er of independent voting members of the governing body (Part VI, line 1b)			4	15
itie	5	Total	number of individuals employed in calendar year 2021 (Part V, line 2a)			5	NONE
Activities &	6	Total	number of volunteers (estimate if necessary)			6	50
ĕ	7a	Total	unrelated business revenue from Part VIII, column (C), line 12			7a	NONE
			nrelated business taxable income from Form 990-T, line 34			7b	NONE
					Prior Year	Current	Year
Revenue	8	Contri	butions and grants (Part VIII, line 1h)		8,162,86	8. 14,38	88,559.
	9	Progra	om convice revenue (Port VIII line 2g)	Y FOR	NO	NE	NONE
	10		ment income (Part VIII, column (A), lines 3, 4, and 7d)	ISPECTION	1	2.	97,169.
Ř	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				15,976.
	12		revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		8,162,88		01,704.
_	13		s and similar amounts paid (Part IX, column (A), lines 1-3)		3,997,19		02,046.
	14		its paid to or for members (Part IX, column (A), line 4)		NO		NONE
"	15		es, other compensation, employee benefits (Part IX, column (A), lines 5-10)		NO		NONE
Expenses			esianal fundación face (Dest IV. estudos (A). lice 44.5)		11,66		28,000.
ber			fundraising expenses (Part IX, column (D), line 25) 862,086.		11,00	' ·	20,000.
Ж			expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,356,49	7 1 40	90,399.
			expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,365,36		20,445.
			nue less expenses. Subtract line 18 from line 12		2,797,51		81,259.
-S	19	Kevei	rue less expenses. Subtract line 16 from line 12		eginning of Current Ye		
ance	20	T-4-1					
SSE	20		assets (Part X, line 16)		12,635,56		92,938.
Net Assets or Fund Balances	21		liabilities (Part X, line 26)		1,146,95	i	<u>18,259.</u>
			sets or fund balances. Subtract line 21 from line 20		11,488,61	1. 19,2	<u>74,679.</u>
	rt II		gnature Block of perjury, I declare that I have examined this return, including accompanying schedul	lee and statement			
			complete. Declaration of preparer (other than officer) is based on all information of whic			my knowledge and	i bellel, it is
Sig	ın		Signature of officer		Date		
He			orginature of officer		Date		
			Type or print name and title				
				Data		DTINI	
Paid	i	Print/	Type preparer's name Prep or's signature	Date		if PTIN	
	parer	PAUI	L HAMMERSCHMIDT \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	6/17/2	2022 self-employe	ed P013841	18
	Only	Firm's	name > BDO USA, LLP		Firm's EIN	13-538159	0
			address ► 100 PARK AVENUE, NEW YORK, NY 10017-500	01	Phone no.	212-885-8	3000
May	the I	RS dis	cuss this return with the preparer shown above? (see instructions)				No
For	Pape	rwork	Reduction Act Notice, see the separate instructions.			Form 9	90 (2021)

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Pa		nent of Program Service A if Schedule O contains a r		 	X
1		the organization's mission:			
	TO BRING T	ENNIS & EDUCATION	TOGETHER TO CHANGE LIVES,	WITH PARTICULAR	
	EMPHASIS O	N UNDER-RESOURCED	YOUTH. USING THIS POWERFUL	COMBINATION,	
	WE HELP SE	RVE UP DREAMS.			
	prior Form 990	or 990-EZ?	icant program services during the yea		X No
		e these new services on So			
	services?		or make significant changes in ho		X No
		e these changes on Sched		s three largest program services, as mea	sured by
	expenses. Secti	on 501(c)(3) and 501(c)(rt the amount of grants and allocations t	
4a	(Code:) (Expenses \$ 5,5	00,406. including grants of \$ 4,5	976,096.) (Revenue \$ NONE)
	SEE SCHEDUL				
4b	(Code:) (Expenses \$ 4	25,950. including grants of \$	125,950.) (Revenue \$ NONE)
	`		COLLEGE EDUCATIONAL SCHOLAR		, ′
			ORS WHO HAVE EXCELLED ACAI		
				·	
			CE AND PARTICIPATED IN AN		
			S GIVEN TO NJTL PARTICIPAN		
		·	\$15,000, SPREAD OVER FOUR		
			SCHOLARSHIPS WERE PROVIDE	D TO 51	
	PARTICIPAN	TS.			
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	(0000.) (Expended ϕ		/ (πονοιίαο ψ	. /
4d	Other program s	services (Describe on Sche	edule O.)		
		including gra		\$	
40	<u> </u>	ervice expenses ►		,	

Form 990 (2021) Page 3
Part IV Checklist of Required Schedules

Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		X
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
4.0	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 donor-restricted endowments	40	37	
4.4	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
_	VII, VIII, IX, or X, as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
а	complete Schedule D, Part VI	11a		Х
h	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more	11a		- 1
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets	110		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a	Х	
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
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
47	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	4-	37	
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17	Х	
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	v	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10	Х	
13	If "Yes," complete Schedule G, Part III	19		Х
2N 2	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		- 23
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	- 3 2		
-	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

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Part	Checklist of Required Schedules (continued)		V	Na
00	Did the consider sometimes that OF 000 of ments or other conjectures to be for demonstrative individuals or		Yes	No
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	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24 a	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	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?	256		37
26	If "Yes," complete Schedule L, Part I	25b		X
26	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		_X_
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
C	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_X
D	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	330		
30	related organization? If "Yes," complete Schedule R, Part V, line 2	36	Х	
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 on Schedule O for Part VI, lines 11b and			
	19? Note : All Form 990 filers are required to complete Schedule O	38	Х	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			
	Fiderite content of the Conference of the Confer		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
C	reportable gaming (gambling) winnings to prize winners?	1c	Х	
JSA 454020				(2021)
1E1030	3801PS 702V 06/17/2022 12:57:09 V21-5.3F		7	,

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
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 NONE			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
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		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
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			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	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			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	1.4-		v
	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 on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	4 5		v
	excess parachute payment(s) during the year?	15		X
4.0	If "Yes," see the instructions and file Form 4720, Schedule N.	16		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		X
17				
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes " complete Form 6069			

13-3782331

FOIII 990 (2	2021,
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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Sect	ion A. Governing Body and Management					
					Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year	1a	15			
Ia	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					
L	committee, explain on Schedule O.	1b	15			
D	Enter the number of voting members included on line 1a, above, who are independent.					
2	Did any officer, director, trustee, or key employee have a family relationship or a business re			2		Х
•	any other officer, director, trustee, or key employee?					
3				3		Х
	supervision of officers, directors, trustees, or key employees to a management company or other p			4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi			5		X
5	Did the organization become aware during the year of a significant diversion of the organization's			6	Х	
6 7-	Did the organization have members or stockholders?				21	
7a	Did the organization have members, stockholders, or other persons who had the power to el			7a	Х	
	one or more members of the governing body?			7 u	21	
b	Are any governance decisions of the organization reserved to (or subject to approval			7b	Х	
•	stockholders, or persons other than the governing body?			7.0	Δ	
8	Did the organization contemporaneously document the meetings held or written actions und	ertake	n auring			
	the year by the following:			8a	Х	
a	The governing body?			8b	X	
b	Each committee with authority to act on behalf of the governing body?			0.0	21	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Inte)	21
	on 211 one oo (17110 oo oo oo na 170 quo oo oo na 170 quinou by tiro inte	<i></i>	10101140		Yes	No
100	Did the organization have local chapters, branches, or affiliates?			10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of					
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt prices.			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fi	•		11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	iiiig tii	5 IOIIII: •			
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>			12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests					
D	rise to conflicts?		The state of the s	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the p					
·	describe on Schedule O how this was done	-		12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review ar					
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation		•			
а	The organization's CEO, Executive Director, or top management official			15a		Х
b	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar	r arra	ngement			
	with a taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization	to eva	aluate its			
-	participation in joint venture arrangements under applicable federal tax law, and take steps to					
	organization's exempt status with respect to such arrangements?			16b		
Secti	ion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶ SEE SCHEDULE O					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable),	990,	and 990-T	(sect	ion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that ap			•		` '
	X Own website Another's website X Upon request Other (explain on Sc	hedule	e O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing docum	nents,	conflict of	inter	est p	olicy,
	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 l	oooks	and records	s >		
	USTA ACCOUNTING DEPT, 70 W RED OAK LANE, WHITE PLAINS, NY 10604					

914-696-7000

Form **990** (2021)

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

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.s
- 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. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or direct	unles	s pe	ition more	e than of is both or/trust employee	an	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) 200751 - 2007	40.00									
(1) DANIEL FABER	40.00			37				NONE	201 200	F0 (62
EXECUTIVE DIRECTOR	5.00			Χ				NONE	321,289.	59,663.
(2) BRIAN HAINLINE DIRECTOR	3.00	X						NONE	25,000.	NONE
(3) VIOLET CLARK	3.00							NONE	23,000.	NONE
DIRECTOR	13.00	X						NONE	20,000.	NONE
(4) KURT ZUMWALT	3.00	21						NONE	20,000.	NONE
DIRECTOR	8.00	X						NONE	10,000.	NONE
(5) KATHLEEN WU	10.00							110112	20,0001	110112
PRESIDENT/DIRECTOR	NONE	Х		Х				NONE	NONE	NONE
(6) MOLLY JOHN	3.00									
DIRECTOR/VICE-PRESIDENT	NONE	Х		Х				NONE	NONE	NONE
(7) JAMES MAJESKI	3.00									
DIRECTOR/VICE-PRESIDENT	NONE	Х		Х				NONE	NONE	NONE
(8) DAVID SCHARF	3.00									
DIRECTOR/TREASURER	NONE	X		Х				NONE	NONE	NONE
(9) RICHARD ADER	3.00									
DIRECTOR/SECRETARY	NONE	Х		Χ				NONE	NONE	NONE
(10) THOMAS CHEN	3.00									
DIRECTOR	NONE	Х						NONE	NONE	NONE
(11) BENJAMIN DOLLER	3.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
(12) JULIA LEVERING	3.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
(13) ROBERT OBERRENDER	3.00									
DIRECTOR	NONE	X						NONE	NONE	NONE
(14) MISSIE RENNIE	3.00									
DIRECTOR	NONE	X						NONE	NONE	
										Earm 991 (2021)

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Form 990 (2021)

Part VIII Special A Officers Directors Trustoes Key Employees and Highest Com

(A) Name and title	(B) Average hours per week (list any hours for	(do i box, office	not ch	Pos neck ss pe	c) sition more	e than c is both or/trust	one an ee)	(D) Reportable compensation from the	(E) Reportable compensation fro related organizations	em a	(F) stimated mount of other npensation	f
	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-MIS	or ar	rom the ganization nd related panization	t
15) RAJ VASWANI	3.00											
DIRECTOR 16) IVAN ZINN	3.00	X						NONE	NO:	NE		NONE
DIRECTOR	NONE	Х						NONE	NO	NE]	NONE
1b Sub-total							>	NONE	•		59,6	
c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	-		-					NONE NONE			59,6	NONI
Total number of individuals (including but not reportable compensation from the organization)	limited to t			d al		e) who	o re			· · · ·		505
	·				110.	.,,,					Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched	cer, directo	or, or <i>ch in</i> a	tru <i>livid</i> u	iste ual	e,	key e	emp	loyee, or highes	compensated	3		X
4 For any individual listed on line 1a, is the organization and related organizations gr	sum of rep	oortab	ole c	om	per	satio	n ai	nd other compens	sation from the			
individual										4	X	
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y										5		X
Section B. Independent Contractors							1	hat are Sandara	ul 0400 000	\ (
 Complete this table for your five highest com- compensation from the organization. Report of year. 												
(A) SEE SCHEDULE O Name and business add	dress							(B) Description of se	rvices	(C Comper		
DEE DCHEDOLE O Hame and Stellioto day												
							+					
2 Total number of independent contractors (i	ncluding by	ut no	t lim	nited	d to	thos	se li	isted above) who	received			

2

more than \$100,000 in compensation from the organization ▶

13-3782331

Form 990 (2021) UST Part VIII Statement of Revenue

rai	t VIII	Check if Schedule O contains a respon-	se or note to an	ny line in this Part V	/III		
		Charles a respon		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b					
ڡۣٚۊۜ	С	Fundraising events 1c	3,014,505.				
ifts	d	Related organizations 1d					
פֿיַּפ	e	Government grants (contributions) 1e					
Sin	f	All other contributions, gifts, grants,					
e ë		and similar amounts not included above . 1f	11,374,054.				
들본	g	Noncash contributions included in					
ξg		lines 1a-1f	;				
တွဲ င်	h	Total. Add lines 1a-1f		14,388,559.			
			Business Code				
Se	2a						
ه ڲؘ	b						
Program Service Revenue	c						
ame	d						
P.S.	e						
7	f	All other program service revenue					
	g	Total. Add lines 2a-2f		NONE			
	3	Investment income (including dividends,					
		other similar amounts)	_	97,169.			97,169.
	4	Income from investment of tax-exempt bond		NONE			
	5	Royalties		NONE			
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c NONE	NONE				
	d	Net rental income or (loss)		NONE			
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a					
<u>e</u>	b	Less: cost or other basis					
evenue		and sales expenses 7b					
	С	Gain or (loss) 7c					
<u>.</u>	d	Net gain or (loss)	▶	NONE			
Other R	8a	Gross income from fundraising					
0		events (not including \$3,014,505.					
		of contributions reported on line					
		1c). See Part IV, line 18	250,666.				
	b	Less: direct expenses 8b	234,690.				
	С	Net income or (loss) from fundraising events	▶	15,976.			15,976.
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	NONE				
	b	Less: direct expenses 9b	NONE				
	С	Net income or (loss) from gaming activities.	▶	NONE			
	10a	Gross sales of inventory, less					
		returns and allowances10a	NONE				
	b	Less: cost of goods sold	NONE				
	С	Net income or (loss) from sales of inventory	▶	NONE			
<u>s</u>			Business Code				
eor Ie	11a						
lan, ent	b						
e e	С						
Miscellaneous Revenue	d	All other revenue					
	е	Total. Add lines 11a-11d	▶	NONE			
	12	Total revenue. See instructions	🕨	14,501,704.			113,145.

13-3782331

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								
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to domestic organizations								
	and domestic governments. See Part IV, line 21	4,976,096.	4,976,096.						
2	Grants and other assistance to domestic								
	individuals. See Part IV, line 22	425,950.	425,950.						
3	Grants and other assistance to foreign								
	organizations, foreign governments, and								
	foreign individuals. See Part IV, lines 15 and 16	NONE							
4	Benefits paid to or for members	NONE							
5	Compensation of current officers, directors,								
	trustees, and key employees	NONE							
6	Compensation not included above to disqualified								
	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)	NONE							
7	Other salaries and wages	NONE							
	Pension plan accruals and contributions (include	NONE							
	section 401(k) and 403(b) employer contributions)								
9	Other employee benefits	NONE							
10	Payroll taxes	NONE							
	Fees for services (nonemployees):								
	Management	NONE							
	Legal	13,939.			13,939.				
	Accounting	NONE							
	Lobbying	NONE							
	Professional fundraising services. See Part IV, line 17	28,000.			28,000				
	Investment management fees	NONE							
	Other. (If line 11g amount exceeds 10% of line 25, column	SEE SCHE O							
Ū	(A), amount, list line 11g expenses on Schedule O.)	875,588.	434,923.	75,422.	365,243.				
12	Advertising and promotion	87,074.	2,022.	11,238.	73,814.				
13	Office expenses	28,650.	4,774.	20,795.	3,081				
14	Information technology	NONE							
15	Royalties	NONE							
16	Occupancy	NONE							
17		119,384.	45,924.	10,574.	62,886				
	Payments of travel or entertainment expenses	,	,						
-	for any federal, state, or local public officials	NONE							
19	Conferences, conventions, and meetings	4,412.		294.	4,118				
	Interest	NONE			,				
21		NONE							
22	Depreciation, depletion, and amortization	NONE							
	Insurance	NONE							
	Other expenses. Itemize expenses not covered								
	above. (List miscellaneous expenses on line 24e. If								
	line 24e amount exceeds 10% of line 25, column								
	(A), amount, list line 24e expenses on Schedule O.)								
а	TICKETS AND PAVERS	154,447.			154,447.				
b	CREDIT CARD FEES	43,979.			43,979				
c	EQUIPMENT RENTAL	37,349.			37,349.				
d	TEMPORARY HELP	27,727.	27,727.						
e	All other expenses	97,850.	8,940.	13,680.	75,230				
	Total functional expenses. Add lines 1 through 24e	6,920,445.	5,926,356.	132,003.	862,086.				
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	, , , , , , , , , , , , , , , , , , , ,		- ,					
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)								

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Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	art X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	426,905.	1	247,415.
	2	Savings and temporary cash investments	10,014,855.	2	11,135,361.
	3	Pledges and grants receivable, net	1,112,009.	3	6,261,758.
	4	Accounts receivable, net	NONE	4	NONE
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	NONE	5	NONE
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	NONE	6	NONE
ts	7	Notes and loans receivable, net	NONE	7	NONE
Assets	8	Inventories for sale or use	NONE		NONE
As	9	Prepaid expenses and deferred charges	29,508.	9	49,127.
	_	Land, buildings, and equipment: cost or other			== , == :
		basis. Complete Part VI of Schedule D 10a			
	h	Less: accumulated depreciation 10b	NONE	100	
	11	Investments - publicly traded securities	1,052,288.	11	3,399,277.
	12	Investments - other securities. See Part IV, line 11	NONE		NONE
	13	Investments - program-related. See Part IV, line 11.	NONE		NONE
	14		NONE		NONE
	15	Intangible assets			
		Other assets. See Part IV, line 11	NONE		NONE
	16	Total assets. Add lines 1 through 15 (must equal line 33)	12,635,565.	16	21,092,938.
	17	Accounts payable and accrued expenses	75,065.	17	453,011.
	18	Grants payable	983,889.	18	1,019,749.
	19	Deferred revenue	88,000.	19	345,499.
	20	Tax-exempt bond liabilities	NONE		NONE
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	NONE	21	NONE
Liabilities	22	Loans and other payables to any current or former officer, director,			
ı≝		trustee, key employee, creator or founder, substantial contributor, or 35%			
<u>ia</u>		controlled entity or family member of any of these persons	NONE		NONE
_	23	Secured mortgages and notes payable to unrelated third parties	NONE		NONE
	24	Unsecured notes and loans payable to unrelated third parties	NONE	24	NONE
	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	NONE	25	NONE
	26	Total liabilities. Add lines 17 through 25	1,146,954.	26	1,818,259.
Seo		Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions	9,801,614.	27	11,951,940.
ĕ	28	Net assets with donor restrictions	1,686,997.	28	7,322,739.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here ▶ and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds		31	
ž.	32	Total net assets or fund balances	11,488,611.	32	19,274,679.
S	33	Total liabilities and net assets/fund balances	12,635,565.	33	21,092,938.
	100		14,000,000.	- 55	Form 990 (2021)

Form **990** (2021)

Form 990 (2021) Page **12**

Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	4,5	501,	<u>704</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2				<u>445</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		7,5	81,	<u> 259</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1	1,4	188,	<u>611</u>
5	Net unrealized gains (losses) on investments	5			204,	<u>809</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 on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	1	9,2	274 <u>,</u>	<u>679</u>
Part	·					
	Check if Schedule O contains a response or note to any line in this Part XII		<u>.</u>			
					Yes	No
1	Accounting method used to prepare the Form 990: CashX Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	on			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were con	piled	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?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted or	ı 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 over	rsight	of			
	the audit, review, or compilation of its financial statements and selection of an independent accounta	nt?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, ex	крlain	on			
	Schedule O.					
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in t	.he			
	Single Audit Act and OMB Circular A-133?			3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	ıdits -		3b		

Form **990** (2021)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

UST	'A I	FOUNDATION INCORPORA	ATED				13-3	782331
Par	tΙ	Reason for Public Cha	rity Status. (All	organizations must o	complet	te this pa	art.) See instruction	S.
Γhe	orga	anization is not a private fou	ndation because it	is: (For lines 1 through	gh 12, ch	eck only	one box.)	
1		A church, convention of chu	urches, or associa	tion of churches descr	ribed in s	ection 1	70(b)(1)(A)(i).	
2		A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E (Form 99	0).)		
3		A hospital or a cooperative	hospital service o	rganization described i	n sectio	n 170(b)	(1)(A)(iii).	
4		A medical research organiz	zation operated in	conjunction with a hos	spital des	scribed ir	section 170(b)(1)(A)	(iii). Enter the
		hospital's name, city, and st	ate:					
5		An organization operated t	for the benefit of	a college or universit	y owned	d or ope	rated by a governme	ental unit described in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6		A federal, state, or local go	vernment or gove	rnmental unit describe	d in sect	ion 170(b)(1)(A)(v).	
7	Х	An organization that norma	ally receives a sub	stantial part of its su	pport fro	om a go	vernmental unit or fro	om the general public
		described in section 170(b)	(1)(A)(vi). (Compl	ete Part II.)				
8		A community trust describe	ed in section 170(b	o)(1)(A)(vi). (Complete	Part II.)			
9		An agricultural research org	ganization describe	ed in section 170(b)(1))(A)(ix) (operated	I in conjunction with a	land-grant college
		or university or a non-land-	grant college of ag	riculture (see instruct	ions). Eı	nter the i	name, city, and state o	f the college or
		university:						
0		An organization that norma	lly receives (1) mo	ore than 331/3 % of its	support	from cor	ntributions, membersh	nip fees, and gross
		receipts from activities rela support from gross investm	ted to its exempt f	unctions, subject to contained by	ertain ex	ceptions	s; and (2) no more than	n 331/3 % of its
		acquired by the organizatio	n after June 30, 19	975. See section 509((a)(2). (C	Complete	Part III.)	Dusinesses
1		An organization organized						
2		An organization organized a	and operated exclu	sively for the benefit o	f, to perf	form the	functions of, or to car	ry out the purposes of
		one or more publicly support	rted organizations	described in section 5	09(a)(1)	or secti	on 509(a)(2). See sec	ction 509(a)(3). Check
		the box on lines 12a throug	h 12d that describ	es the type of suppor	ting orga	anization	and complete lines 1	2e, 12f, and 12g.
а		Type I. A supporting orga	anization operated	, supervised, or contro	olled by	its supp	orted organization(s),	typically by giving
		the supported organization	•	•			. , ,	
		supporting organization.						
b		Type II. A supporting org	anization supervise	ed or controlled in co	nnection	with its	supported organizati	on(s), by having
		control or management of	•				• • • • • • • • • • • • • • • • • • • •	
		organization(s). You must		=		·		
С		Type III functionally integ	grated. A supporti	ng organization opera	ited in co	onnectio	n with, and functiona	lly integrated with,
		_ its supported organization						
d		Type III non-functionally		•				ted organization(s)
		that is not functionally inte	egrated. The organ	nization generally mus	t satisfy	a distrib	ution requirement and	d an attentiveness
		requirement (see instruct	-		-		•	
е		Check this box if the orga	nization received	a written determinatio	n from tl	he IRS th	nat it is a Type I, Type I	II, Type III
		functionally integrated, or	Type III non-funct	ionally integrated supp	porting c	organizat	ion.	
f	Ent	ter the number of supported	l organizations					
g	Pro	ovide the following information	on about the suppo	orted organization(s).				
	(i) Na	ame of supported organization	(ii) EIN	(iii) Type of organization	· ,	organization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1-10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
					Yes	No		,
A)								
B)								
C)								
-,								
D)								
-,								
E)								
_,								

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	11,739,882.	6,214,296.	7,676,037.	8,162,868.	14,388,559.	48,181,642.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						NONE	
4	Total. Add lines 1 through 3	11,739,882.	6,214,296.	7,676,037.	8,162,868.	14,388,559.	48,181,642.	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount							
	shown on line 11, column (f)						16,629,659.	
6	Public support. Subtract line 5 from line 4						31,551,983.	
	tion B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total	
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	11,739,882. 98,905.	6,214,296. 195,650.	7,676,037. 177,250.	8,162,868. 48,785.	14,388,559. 97,169.	48,181,642. 617,759.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on	94,849.	189,517.	116,662.	NONE	15,976.	417,004.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						NONE	
11	Total support. Add lines 7 through 10						49,216,405.	
12	Gross receipts from related activities, etc. (s	see instructions) .				12		
13	First 5 years. If the Form 990 is for organization, check this box and stop here			l, third, fourth,	or fifth tax yea	ar as a section	501(c)(3) ▶	
Sec	tion C. Computation of Public Sup							
14	Public support percentage for 2021 (li		-			14	64.11 %	
15	Public support percentage from 2020 Schedule A, Part II, line 14							
16a	a 331/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this							
	box and stop here . The organization qualifies as a publicly supported organization							
D		=						
170	this box and stop here . The organization 10%-facts-and-circumstances test - 2			-				
11a	10% or more, and if the organization	_						
	Part VI how the organization meets						•	
	organization			J	•			
h	10%-facts-and-circumstances test - 2							
b	15 is 10% or more, and if the organization	-						
	in Part VI how the organization meets					-	•	
	organization			•	•			
18	Private foundation. If the organization							
	instructions							
						 	<u> </u>	

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 .						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support		•	•	•		•
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6.						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties, and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on.						
40							
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for	the organizati	on's first secon	d third fourth	or fifth tay ve	ar as a section	501(c)(3)
17	organization, check this box and stop here .	ū	•		•		````
Sec	tion C. Computation of Public Supp			<u> </u>			
15	Public support percentage for 2021 (line 8,		•	mn (f))		15	%
16	Public support percentage from 2020 Scheo					16	% %
	tion D. Computation of Investment					10	/0
	-			13 column (f\)		17	%
17	Investment income percentage for 2021 (lin						<u>%</u> %
18	Investment income percentage from 2020 S					18	
туа	331/3% support tests - 2021. If the org						
	17 is not more than 331/3%, check this						
b	331/3% support tests - 2020. If the orga						. \square
20	line 18 is not more than 331/3%, check		-	•			

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Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.

 2 Did the organization have any supported organization that does not have an IRS determination of status.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- 10 a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
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Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
<u></u>	provide detail in Part VI.	11c		
Section	on B. Type I Supporting Organizations		V	NI -
			Yes	NO
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
_				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.			
	11 0 1 7	3		
	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structi	ons).	
a	The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.			
b c	The organization is the parent of each of its supported organizations. Complete line's below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	oo inst	uotion	2)
·	The organization supported a governmental entity. Describe in Fait vi now you supported a governmental entity (se	C IIISU	Yes	
2	Activities Test. Answer lines 2a and 2b below.			
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3				
3 a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	art V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nization	<u> </u>				
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Section A - Adjusted Net Income (A) Prior Year							
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
4	Add lines 1 through 3.	4					
5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6					
_7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Se	ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
a	Average monthly value of securities	1a					
_	Average monthly cash balances	1b					
C	Fair market value of other non-exempt-use assets	1c					
	Total (add lines 1a, 1b, and 1c)	1d					
e	Discount claimed for blockage or other factors (explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by 0.035.	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Se	ction C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 of line 1.	2					
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3					
4		4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6					
7			ted Type III supporting	g organization			
	(see instructions).	, ,	31 11°-				

Schedule A (Form 990) 2021

Part	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sect	ion D - Distributions				Current Year		
1	Amounts paid to supported organizations to accomplish e	xempt purposes		1			
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of support	ed				
	organizations, in excess of income from activity	2					
3	Administrative expenses paid to accomplish exempt purpo	3					
4	4 Amounts paid to acquire exempt-use assets						
5	5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)						
6	Other distributions (describe in Part VI). See instructions.	6					
7	Total annual distributions. Add lines 1 through 6.	7					
8	Distributions to attentive supported organizations to which						
	(provide details in Part VI). See instructions.						
9	9 Distributable amount for 2021 from Section C, line 6			9			
10	Line 8 amount divided by line 9 amount			10			
		(1)	(ii)		(iii)		

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
_1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
_3	Excess distributions carryover, if any, to 2021			
а	From 2016			
b	From 2017			
С	From 2018			
d	From 2019			
е	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
i	Carryover from 2016 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2017			
b	Excess from 2018			
С	Excess from 2019			
d	Excess from 2020			
е	Excess from 2021			

Schedule A (Form 990) 2021

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

► Attach to Form 990 or Form 990-PF.

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for the latest information. **Employer identification number** Name of the organization

USTA FOUNDATION INCORPORATED 13-3782331 Organization type (check one): Filers of: Section: X Form 990 or 990-EZ 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it

must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2021)

Name of organization
USTA FOUNDATION INCORPORATED

Employer identification number 13-3782331

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is neede

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1_	N/A	\$4,893,836.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	N/A	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3	N/A	\$730,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
4	N/A	\$496,836.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5	N/A	\$322,055.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6_	N/A	\$305,096.	Person Payroll Noncash (Complete Part II for noncash contributions.)

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.

2021
Open to Public

OMB No. 1545-0047

Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service Name of the organization Employer identification number USTA FOUNDATION INCORPORATED 13-3782331 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2a 2b 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

Schedule D (Form 990) 2021

		A FOUNDATION				782331 Page 2
Pa	rt III Organizations Maintaini				<u>'</u>	
3	Using the organization's acquisition		other records, checl	cany of the follow	ing that make sigr	nificant use of its
	collection items (check all that app	ly):				
а	Public exhibition		d Loan o	or exchange progra	m	
b	Scholarly research		e Other			
С	Preservation for future gene	rations				
4	Provide a description of the organ	nization's collections	and explain how t	hey further the or	ganization's exemp	t purpose in Part
	XIII.		•	•		
5	During the year, did the organization	on solicit or receive o	donations of art. hist	orical treasures, or	other similar	
-	assets to be sold to raise funds rath				_	Yes No
Pa	rt IV Escrow and Custodial A		amou do partor mo			
	Complete if the organiza		s" on Form 990 F	Part IV line 9 or r	eported an amour	nt on Form
	990, Part X, line 21.	alon anoworda ne	,	art 17, 1110 0, 01 1	oportou un amour	10111 01111
12	Is the organization an agent, trus	tee custodian or o	ther intermediary fo	or contributions or	other assets not	
ıa	included on Form 990, Part X?					Yes No
L	If "Yes," explain the arrangement in					res No
D	ir res, explain the arrangement i	n Part XIII and comp	piete the following tar	oie:	A	
	Dente den halana				Amount	
C	Beginning balance					
d	Additions during the year					
е	Distributions during the year					
f	Ending balance					
2a	Did the organization include an am				-	Yes No
b	If "Yes," explain the arrangement in	n Part XIII. Check h	ere if the explanation	has been provided	on Part XIII	
Pa	rt V Endowment Funds.					
	Complete if the organiza	ation answered "Ye	es" on Form 990, F	Part IV, line 10.		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	318,084.	338,733.	299,591.	354,332.	315,968.
b	Contributions					35,375.
c	Net investment earnings, gains,					
·	and losses	18,460.	-5,649.	54,142.	-17,343.	17,989.
٨	Grants or scholarships	15,000.	15,000.	15,000.	2,000.	15,000.
d	•	.,	.,	.,	,	.,
е	Other expenditures for facilities				35,398.	
	and programs				33,370.	
f	Administrative expenses	201 544	210 004	220 522	000 501	254 220
g	End of year balance	321,544.	318,084.	338,733.	299,591.	354,332.
2	Provide the estimated percentage			column (a)) held as	:	
а	Board designated or quasi-endown		_%			
b	Permanent endowment ► 100.0					
С	Term endowment ▶	.%				
	The percentages on lines 2a, 2b, a	·				
3a	Are there endowment funds not in	the possession of th	ne organization that	are held and admir	nistered for the	N/ N
	organization by:					Yes No
	(i) Unrelated organizations					3a(i) X
	(ii) Related organizations					3a(ii) X
b	If "Yes" on line 3a(ii), are the relate	ed organizations liste	d as required on Sch	edule R?		3b
4	Describe in Part XIII the intended u		tion's endowment fur	nds.		
Pa	rt VI Land, Buildings, and Equ	uipment.		D. (IV II 44 /	0. F 000 B.	
	Complete if the organization					
	Description of property	(a) Cost or (inves			cumulated (d) Book value
1a	Land	,	, (3	,		
b	Buildings					
c	Leasehold improvements					
d	Equipment.					
Tota	Other I. Add lines 1a through 1e. (Column	(d) must equal Form	n 000 Part V colum	n (R) line 10c)		
iota	i. Aud IIIIes Ta IIIIOUGII TE. (C <i>OIUIIIII</i>	(u) musi equal FOM	n 330, Γαιι Λ, COIUIIII	1 (D), IIII C 100.)	🖊	

Schedule D (Form 990) 2021

Schedule D (F	Form 990) 2021 USTA FOUNDATIO	N INCORPORATED	1:	3-3782331 Page
Part VII	Investments - Other Securities.			
	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11b. See Form 990	, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1) Financi	al derivatives			
(2) Closely	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.) 🔒 🕨			
Part VIII	Investments - Program Related.			
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11c. See Form 990	, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11d. See Form 990	, Part X, line 15.
	(a) De	scription		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	umn (b) must equal Form 990, Part X, col. (B) I	line 15.)	<u> </u>	
Part X	Other Liabilities. Complete if the organization answered line 25.	d "Yes" on Form 990	, Part IV, line 11e or 11f. See For	m 990, Part X,
1.		otion of liability		(b) Book value
	ral income taxes	- y		(,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII . X

JSA 1E1270 1.000

(9)

Schedu	le D (Form 990) 2021 USTA FOUNDATION INCORPORATED	13-	·3782331 Page 4
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	16,925,620.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	2,847,165.
3	Subtract line 2e from line 1	3	14,078,455.
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.)		
С	Add lines 4a and 4b	4c	423,249.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	14,501,704.
Part		ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	9,139,552.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	2,642,356.
3	Subtract line 2e from line 1	3	6,497,196.
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		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	423,249.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	6,920,445.
	XIII Supplemental Information.		
Provid 2; Part	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Ft XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	Part V, nation.	line 4; Part X, line
SEE	SUPPLEMENTAL PAGE		

Part XIII Supplemental Information (continued)

PART V, LINE 4:

INCOME FROM THE PERMANENTLY RESTRICTED DONOR FUNDS IS RESERVED FOR THE AWARDING OF COLLEGE SCHOLARSHIPS.

PART X, LINE 2:

USTA FOUNDATION INCORPORATED IS A NOT-FOR-PROFIT ORGANIZATION THAT IS

EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE

CODE AND, THEREFORE, HAS MADE NO PROVISION FOR INCOME TAXES IN THE

ACCOMPANYING FINANCIAL STATEMENTS. THE FOUNDATION HAS FILED ALL

APPLICABLE RETURNS WHEN REQUIRED. FOR THE YEAR ENDED DECEMBER 31, 2021,

THERE WERE NO INTEREST OR PENALTIES REQUIRED TO BE RECORDED OR DISCLOSED

IN THE FINANCIAL STATEMENTS. IN ADDITION, THE FOUNDATION HAS NOT TAKEN AN

UNSUBSTANTIATED TAX POSITION THAT WOULD REQUIRE PROVISION OF A LIABILITY.

PART XI & PART XII, LINE 4B:

INDIRECT SPECIAL EVENT EXPENSES...\$423,249.

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

2027	
Open to Public	
Inspection	

varire or the organization					Linployer identification	on number
USTA FOUNDATION INCORPORATED					13-378233	31
Part I Fundraising Activities. Comp	lete if the organi	ization ar	nswered "	Yes" on Form 99		
Form 990-EZ filers are not re	-					
1 Indicate whether the organization rais	·			activities. Check a	all that apply.	
	e		_	non-government g		
				-		
b X Internet and email solicitations	f			government grants	S	
c Phone solicitations	g	X Spe	cial fundra	ising events		
d X In-person solicitations						
2a Did the organization have a written o	r oral agreement w	ith any in	dividual (in	ncluding officers, d	lirectors, trustees, _	
or key employees listed in Form 990	, Part VII) or entity	in connec	ction with p	orofessional fundra	ising services?	X Yes No
b If "Yes," list the 10 highest paid indi-	viduals or entities	(fundraise	rs) pursua	ant to agreements	under which the	fundraiser is to be
compensated at least \$5,000 by the		`	, ,	J		
. , ,	· ·					
					(v) Amount paid to	
(i) Name and address of individual	GT A .: '.		ndraiser have	(iv) Gross receipts	(or retained by)	(vi) Amount paid to
or entity (fundraiser)	(ii) Activity		or control of outions?	from activity	fundraiser listed in	(or retained by) organization
		0011111	Juliono.		col. (i)	organization
SEE SUPPLEMENT INFORMATION		Yes	No			
1						
2						
3						
· ·						
4						
5						
6						
7						
ı						
•						
8						
9						
10						
Fatal				NONE	20 000	NONE
Total				NONE	<u> </u>	NONE
3 List all states in which the organizar	tion is registered o	or license	d to solicit	contributions or	has been notified	it is exempt from
registration or licensing.						
AL, AK, AR, CA, CO, CT, DC, FL, GA, HI	,IL,					
KS, KY, ME, MD, MA, MI, MN, MS, NV, NH	,NJ,NM,NY,NC,	ND,OH,				
OK,OR,PA,RI,SC,TN,UT,VA,WA,WV						
	,					

_	edule I rt [Fundraising Events. Complete than \$15,000 of fundraising even	ent contributions and o	nswered "Yes" on Form	990, Part IV, line	
_		gross receipts greater than \$5,00	0. (a) Event #1 GALA (event type)	(b) Event #2 US OPEN PRO AM (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	2,278,622.	499,540.	487,009.	3,265,171
œ	2	Less: Contributions Gross income (line 1 minus	2,206,222.	387,640.	420,643.	3,014,505
		line 2)	72,400.	111,900.	66,366.	250,666
	4	Cash prizes				
Se		Noncash prizes				
ense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	8,164.	7,882.	31,244.	47,290
Dire	8	Entertainment				
	9	Other direct expenses	28,000.	122,200.	37,200.	187,400
Pa	10 11 rt	Direct expense summary. Add lin Net income summary. Subtract lil Gaming. Complete if the org \$15,000 on Form 990-EZ, lin	anization answered "	ımn (d) umn (d) Yes" on Form 990, F	Part IV, line 19, or	reported more than
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
<u>~</u>	1	Gross revenue				
enses	2	Cash prizes				
Expe	3	Noncash prizes				
Direct Expo	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	% Yes% No	Yes% No	
	7	Direct expense summary. Add lin	es 2 through 5 in colu	ımn (d)		
	8	Net gaming income summary. Su	ubtract line 7 from line	1, column (d)	>	
9 8		Enter the state(s) in which the orgalis the organization licensed to con If "No," explain:		in each of these state	os?	Yes No
10a	1	Were any of the organization's gamine	g licenses revoked, sus	pended, or terminated du	ring the tax year?	Yes No

Schedule G (Form 990) 2021

If "Yes," explain:

FORM 990, SCHEDULE G, LINE 2B - HIGHEST PAID INDIVIDUALS/ENTITIES

NAME:

DIANE M. STONE

ADDRESS:

10229 WHITETAIL DRIVE OAKDALE, CA 95361

ACTIVITY :

GRANT WRITING

CUSTODY OR CONTROL OF CONTRIBUTION?

GROSS RECEIPTS FROM ACTIVITY: NONE

AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER: 28,000.

AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION: NONE

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public Inspection

Name of the organization						Employer identificat	ion number
USTA FOUNDATION INCORPORATED						13-3782331	
Part I General Information on Grants and	d Assistanc	e					
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced 	s or assistand dures for mor	e? nitoring the use	of grant funds in th	e United States.			X Yes No
Part IV, line 21, for any recipient the		_			. •		es on Form 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ADVANTAGE CLEVELAND TENNIS AND EDUCATION							COMMUNITY ATHLETIC 8
PO BOX 43063 CLEVELAND, OH 44143	27-1789893	501(C)(3)	48,500.				EDUCATION PROGRAM
(2) ADVANTAGE LANCASTER							COMMUNITY ATHLETIC &
1100 E. ORANGE ST. LANCASTER, PA 17603	05-0527280	501(C)(3)	25,000.				EDUCATION PROGRAM
(3) A'S & ACES							COMMUNITY ATHLETIC &
1036 ARABELLA ST. NEW ORLEANS, LA 70115	26-1905295	501(C)(3)	36,500.				EDUCATION PROGRAM
(4) ATLANTA COMMUNITY TENNIS FOUNDATION, INC.							COMMUNITY ATHLETIC 8
6075 THE CORNERS PKWY, PEACHTREE CORNERS,GA	04-3750678	501(C)(3)	34,500.				EDUCATION PROGRAM
(5) BIRMINGHAM AREA TENNIS ASSOCIATION							COMMUNITY ATHLETIC 8
PO BOX 131114 BIRMINGHAM, AL 35213	63-1241128	501(C)(3)	19,500.				EDUCATION PROGRAM
(6) BORDER YOUTH TENNIS EXCHANGE, INC.							COMMUNITY ATHLETIC 8
PO BOX 367 NOGALES, AZ 85628	82-1211390	501(C)(3)	52,000.				EDUCATION PROGRAM
(7) BOYS & GIRLS CLUB OF SOUTH OAKLAND COUNTY							COMMUNITY ATHLETIC 8
1545 EAST LINCOLN ROYAL OAK, MI 48067	38-1579180	501(C)(3)	21,750.				EDUCATION PROGRAM
(8) BOYS AND GIRLS CLUB OF CHESTER							COMMUNITY ATHLETIC 8
201 EAST 7TH ST CHESTER, PA 19013	23-1490049	501(C)(3)	7,500.				EDUCATION PROGRAM
(9) BRUNSWICK COUNTY TENNIS ASSOC.							COMMUNITY ATHLETIC 8
1374 LIBERTY LANDING RD. WINNABOW, NC 28479	56-2276562	501(C)(3)	10,600.				EDUCATION PROGRAM
(10) BULLARD FAMILY FOUNDATION INC							COMMUNITY ATHLETIC 8
5308 VAN DYKE RD. LUTZ, FL 33558	82-5519212	501(C)(3)	10,000.				EDUCATION PROGRAM
(11) CAPITAL REGION YOUTH TENNIS FOUNDATION INC.							COMMUNITY ATHLETIC 8
785 WASHINGTON AVE. ALBANY, NY 12206	14-1733312	501(C)(3)	41,000.				EDUCATION PROGRAM
(12) CENTRAL LINCOLN COUNTY YOUNG MENS CHRISTIAN							COMMUNITY ATHLETIC 8
525 MAIN ST. DAMARICOTTA, ME 04543	22-2978129	501(C)(3)	10,000.				EDUCATION PROGRAM
2 Enter total number of section 501(c)(3) and	government	organizations lis	sted in the line 1 tal	ble			128
3 Enter total number of other organizations list	ted in the line	1 table	<u> </u>			.	2

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

Schedule I (Form 990) 2021

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

2021

OMB No. 1545-0047

Department of the Treasury

USTA FOUNDATION INCORPORATED

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

Open to Public Inspection

13-3782331

Internal Revenue Service

Name of the organization

| Service | Se

es the organization maintain records to s selection criteria used to award the gran							
		:e?		=			Yes No
scribe in Part IV the organization's proce							
<u> </u>					nlete if the organiz	ation answered "Y	es" on Form 990
		-					C3 0111 01111 000,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
TANOOGA TENNIS ASSOCIATION							COMMUNITY ATHLETIC &
3383 CHATTANOOGA, TN 37422	58-1351363	501(C)(3)	26,000.				EDUCATION PROGRAM
AND COUNTY OF SAN FRANCISCO							COMMUNITY ATHLETIC &
	94-6000417	GOVERNMENT	10,000.				EDUCATION PROGRAM
PARK RACQUET CLUB, INC.							COMMUNITY ATHLETIC &
	74-2334935	501(C)(3)	15,000.				EDUCATION PROGRAM
PARKS FOUNDATION							COMMUNITY ATHLETIC &
H AVE. NEW YORK, NY 10021	13-3561657	501(C)(3)	6,000.				EDUCATION PROGRAM
MBUS REGIONAL TENNIS ASSOCIATION INC.							COMMUNITY ATHLETIC &
	58-6043414	501(C)(3)	20,000.				EDUCATION PROGRAM
AS TENNIS ASSOCIATION							COMMUNITY ATHLETIC &
	75-6020581	501(C)(3)	124,740.				EDUCATION PROGRAM
URY GRASSROOTS TENNIS INC.							COMMUNITY ATHLETIC &
	20-4929313	501(C)(3)	25,000.				EDUCATION PROGRAM
J JUNIOR TENNIS FOUNDATION							COMMUNITY ATHLETIC &
H LANE COLUMBIA, SC 29223	57-1031121	501(C)(3)	32,500.				EDUCATION PROGRAM
AY BEACH YOUTH TENNIS FOUNDATION							COMMUNITY ATHLETIC &
NES RD BOYNTON BEACH, FL 33436	47-5161144	501(C)(3)	10,000.				EDUCATION PROGRAM
ER TENNIS PARK INC.							COMMUNITY ATHLETIC &
FRANKLIN ST. DENVER, CO 80210	82-0620668	501(C)(3)	20,000.				EDUCATION PROGRAM
CTED INITIATIVES FOR YOUTH, INC.							COMMUNITY ATHLETIC &
SE BLVD., STE 220 SLIDELL, LA 70458	26-4459825	501(C)(3)	42,500.				EDUCATION PROGRAM
PALO ALTO TENNIS & TUTORING							COMMUNITY ATHLETIC &
	26-3316879	501(C)(3)	47,500.				EDUCATION PROGRAM
11 7 7 11 11 11 11 11 11 11 11 11 11 11	Part IV, line 21, for any recipient to 1 (a) Name and address of organization or government TANOOGA TENNIS ASSOCIATION TO PARK RACQUET CLUB, INC. TO PARK RACQUET CLUB, INC. TO PARK FOUNDATION TO PARK FOUNDATION TO PARK FOUNDATION TO PARK REGIONAL TENNIS ASSOCIATION INC. TO PARK TENNIS ASSOCIATION TO PARK TENNIS FOUNDATION TO PARK TENNIS FOUNDATION TO PARK TENNIS FOUNDATION TO PARK TENNIS FOUNDATION TO PARK TENNIS PARK INC. TO	Part IV, line 21, for any recipient that received 1 (a) Name and address of organization or government TANOOGA TENNIS ASSOCIATION 33833 CHATTANOOGA, TN 37422 AND COUNTY OF SAN FRANCISCO FYAN ST. SAN FRANCISCO, CA 94117 PARK RACQUET CLUB, INC. INING ST. DENVER, CO 80218 PARKS FOUNDATION PHAVE. NEW YORK, NY 10021 PHAVE. SECOLUMBUS, GA 31908 PHAVE STENNIS ASSOCIATION INC. PHAVE STENNIS ASSOCIATION PHAVE STENNIS ASSOCIATION PHAVE STENNIS ASSOCIATION PHAVE STENNIS ASSOCIATION PHAVE STENNIS FOUNDATION PHAVE STENNIS PARK INC. PRANKLIN ST. DENVER, CO 80210 PHAVE TENNIS PARK INC. PRANKLIN ST. DENVER, CO 80210 PHAVE STENNIS FOR YOUTH, INC. PHAVE STENNIS FOR YOUTH AND THE	Part IV, line 21, for any recipient that received more than \$5 1 (a) Name and address of organization or government TANOOGA TENNIS ASSOCIATION 3383 CHATTANOOGA, TN 37422 58-1351363 501(C)(3) AND COUNTY OF SAN FRANCISCO YAN ST. SAN FRANCISCO, CA 94117 PARK RACQUET CLUB, INC. INING ST. DENVER, CO 80218 PARKS FOUNDATION PARKS FOUNDATION PARKS FOUNDATION THAVE. NEW YORK, NY 10021 MBUS REGIONAL TENNIS ASSOCIATION INC. 1236 COLUMBUS, GA 31908 AS TENNIS ASSOCIATION DWAY RD. STE. 104 ADDISON, TX 75001 TO-6020581 TO-1031121 TO-1031 TO-1031121 TO-1031 TO-1031 TO-1031121 TO-1031 TO-1031121 TO-1031 TENNIS PARK INC. FRANKLIN ST. DENVER, CO 80210 TO-1031121 TO-1031121 TO-1031 TO-1031 TO-1031121 TO-1031 TO-1	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be a second or government (b) EIN (c) IRC section (if applicable) (d) Amount of cash grant	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if a 1 (a) Name and address of organization or government (b) EIN (c) IRC section (if applicable) (d) Amount of cash (e) Amount of non-cash assistance TANOGA TENNIS ASSOCIATION 3383 CHATTANOGA, TN 37422 58-1351363 501(C)(3) 26,000. AND COUNTY OF SAN FRANCISCO YAN ST. SAN FRANCISCO, CA 94117 94-6000417 GOVERNMENT 10,000. PARK RACQUET CLUB, INC. NING ST. DENVER, CO 80218 74-2334935 501(C)(3) 15,000. PARKS FOUNDATION 13-3561657 501(C)(3) 6,000. MBUS REGIONAL TENNIS ASSOCIATION INC. 1236 COLUMBUS, GA 31908 58-6043414 501(C)(3) 20,000. LAS TENNIS ASSOCIATION 58-6043414 501(C)(3) 20,000. LAS TENNIS ASSOCIATION 59-6020581 501(C)(3) 25,000. LAY PARKS FOUNDATION 59-6020581 501(C)(3) 32,500. LAY JUNIOR TENNIS FOUNDATION 59-1031121 501(C)(3) 32,500. LAY BEACH YOUTH TENNIS FOUNDATION 59-7 PALO ALTO TENNIS FOR YOUTH, INC. SEE BLVD., STE 220 SLIDELL, LA 70458 26-4459825 501(C)(3) 47,500. TERMILIN ST. DENVER, CO 80210 26-3316879 501(C)(3) 47,500. Ter total number of section 501(C)(3) and government organizations listed in the line 1 table	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is in 1 (a) Name and address of organization or government (b) EIN (c) IRC section (if applicable) (d) Amount of cash (e) Amount of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (a) Amount of cash (e) Amount of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (f) Amount of cash (e) Amount of cash (e) Amount of cash (e) Amount of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (f) Amount of cash (e)	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization or government (b) EIN (c) IRC section (if sphicable) (d) Amount of cash (c) Amount of noncash assistance (c) (b) Amount of noncash assistance (c) (c) (c) Amount of noncash assistance (c) (c) Amount of noncash assist

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

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public Inspection

Employer identification number

USTA FOUNDATION INCORPORATED						13-3782331	
Part I General Information on Grants a	and Assistanc	е					
1 Does the organization maintain records to	substantiate th	ne amount of the	e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
the selection criteria used to award the gra	ants or assistand	e?					Yes No
2 Describe in Part IV the organization's prod	edures for mor	nitoring the use	of grant funds in the	e United States.			
Part II Grants and Other Assistance to	Domestic Or	ganizations a	nd Domestic Gov	vernments. Com	plete if the organiz	ation answered "Y	es" on Form 990.
Part IV, line 21, for any recipient		•					,
1 (a) Name and address of organization	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	· · · · · · · · · · · · · · · · · · ·	(g) Description of	(h) Purpose of grant
or government	. , ,	(if applicable)	grant	cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	noncash assistance	or assistance
(1) EASTERN COLORADO TENNIS ASSOCIATION							COMMUNITY ATHLETIC &
52583 COUNTRY RD #107 GROVER, CO 80729	87-2370993	501(C)(3)	7,500.				EDUCATION PROGRAM
(2) ESSEX GRASSROOTS TENNIS & EDUCATION INC.							COMMUNITY ATHLETIC &
299 COLUMBIA TPKE FLORHAM PARK, NJ 07932	81-4507628	501(C)(3)	15,000.				EDUCATION PROGRAM
(3) FAMILY BIZ BUILDER							COMMUNITY ATHLETIC &
1221 BONDS RD TUNICA, MS 38676	47-1483063	501(C)(3)	37,000.				EDUCATION PROGRAM
(4) FAST CTA DBA CINCINNATI TENNIS FOUNDATION							COMMUNITY ATHLETIC 8
3280 HARDISTY AVE. CINCINNATI, OH 45208	47-3682420	501(C)(3)	45,000.				EDUCATION PROGRAM
(5) FIRST BREAK ACADEMY							COMMUNITY ATHLETIC &
18400 AVALON BLVD., CARSON, CA 90746	47-1940265	501(C)(3)	70,000.				EDUCATION PROGRAM
(6) FIRST SERVE BRIDGEPORT INC.							COMMUNITY ATHLETIC &
PO BOX 185574 HAMDEN, CT 06518	45-3867870	501(C)(3)	17,500.				EDUCATION PROGRAM
(7) FIRST SERVE MIAMI INC.							COMMUNITY ATHLETIC &
12231 SW 129 COURT MIAMI, FL 33186	59-1603794	501(C)(3)	98,500.				EDUCATION PROGRAM
(8) FIRST SERVE OKC FOUNDATION							COMMUNITY ATHLETIC &
3400 N PORTLAND AVE OKLAHOMA CITY, OK 73112	46-3499004	501(C)(3)	37,500.				EDUCATION PROGRAM
(9) FIRST SERVE TULSA FOUNDATION							COMMUNITY ATHLETIC &
PO BOX 33017 TULSA, OK 74153	84-4327796	501(C)(3)	6,000.				EDUCATION PROGRAM
(10) FIRST SERVE-NEW MEXICO INC.							COMMUNITY ATHLETIC &
123 TANO NORTE SANTE FE, NM 87506	27-0044395	501(C)(3)	40,000.				EDUCATION PROGRAM
(11) FLORENCE TENNIS ASSOCIATION							COMMUNITY ATHLETIC &
PO BOX 12180 FLORENCE, SC 29505	58-2339034	501(C)(3)	6,000.				EDUCATION PROGRAM
(12) FOUR ACES RACQUET CLUB INC.							COMMUNITY ATHLETIC &
18 BONDA DRIVE GREENVILLE, MS 38701	35-2368234	501(C)(3)	7,500.				EDUCATION PROGRAM

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

► Attach to Form 990.

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Open to Public Inspection

Name of the organization Employer identification number USTA FOUNDATION INCORPORATED 13-3782331 **General Information on Grants and Assistance** 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Yes No the selection criteria used to award the grants or assistance? 2 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. (f) Method of valuation (book, FMV, appraisal, other) (c) IRC section 1 (a) Name and address of organization (b) EIN (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant (if applicable) grant cash assistance noncash assistance or assistance or government (1) FRED WELLS TENNIS & EDUCATION CENTER, INC. COMMUNITY ATHLETIC & 100 FEDERAL DRIVE ST. PAUL, MN 55111 41-1965977 501(C)(3) 34,500. EDUCATION PROGRAM (2) FRONTLINE OUTREACH COMMUNITY ATHLETIC & 3000 C R SMITH ST. ORLANDO, FL 32805 23-7227148 501(C)(3) 25,000. EDUCATION PROGRAM (3) GAINESVILLE AREA COMMUNITY TENNIS ASSOC INC COMMINITY ATHLETIC & PO BOX 357492 GAINESVILLE, FL 32635 54-2158508 501(C)(3) 47,500. EDUCATION PROGRAM (4) GOLDEN TRIANGLE TENNIS COMMUNITY ATHLETIC & 82-2998953 501(C)(3) 15,000. 155 BRELAND OVERLOOK COLUMBUS, MS 39701 EDUCATION PROGRAM (5) GREATER NEWARK TENNIS & EDUCATION COMMUNITY ATHLETIC & 1 CARLA COURT MORRISTOWN, NJ 07960 82-4810511 501(C)(3) 33,500. EDUCATION PROGRAM (6) GREATER POTTSTOWN TENNIS AND LEARNING ASSOC COMMUNITY ATHLETIC & 724 N ADAMS ST POTTSTOWN, PA 19464 45-5378964 501(C)(3) 36,000. EDUCATION PROGRAM (7) GREENSBORO TENNIS FOUNDATION COMMUNITY ATHLETIC & 3802 JAYCEE PARK DRIVE GREENSBORO, NC 27455 56-2040723 501(C)(3) 74,650. EDUCATION PROGRAM (8) HARLEM JUNIOR TENNIS AND EDU. PROGRAM, INC. COMMINITY ATHLETIC & 40 WEST 143RD ST. NEW YORK, NY 10037 13-3076419 501(C)(3) 89.575. EDUCATION PROGRAM (9) HOUSTON TENNIS ASSOCIATION COMMUNITY ATHLETIC & 3535 BRIARPARK DR, #215 HOUSTON, TX 77042 74-6061090 501(C)(3) 64,500. EDUCATION PROGRAM (10) HQ TENNIS FOUNDATION COMMUNITY ATHLETIC & 450 ROCKAWAY PKWY, 1F BROOKLYN, NY 11212 81-3301812 501(C)(3) 19,500. EDUCATION PROGRAM (11) INNERCITY TENNIS FOUNDATION COMMUNITY ATHLETIC & 4005 NICOLLET AVE S MINNEAPOLIS, MN 55409 41-6038537 501(C)(3) 100,835 EDUCATION PROGRAM

5,500

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

74-2021178 | 501(C)(3)

(12) INTERCOLLEGIATE TENNIS COACHES ASSOC., INC.

1130 E UNIVERSITY DR #115 TEMPE, AZ 85281

Schedule I (Form 990) 2021

COMMUNITY ATHLETIC &

EDUCATION PROGRAM

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

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

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

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Open to Public Inspection

Schedule I (Form 990) 2021

Name of the organization						Employer identificat	ion number
USTA FOUNDATION INCORPORATED						13-3782331	
Part I General Information on Grants and	d Assistanc	e				•	
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced Part II Grants and Other Assistance to D 	s or assistand dures for mor	e? nitoring the use	of grant funds in th	e United States.			Yes No
Part IV, line 21, for any recipient the	nat received	more than \$5	,000. Part II can	be duplicated if a	additional space is n	eeded.	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) INTERNATIONAL TENNIS HALL OF FAME							COMMUNITY ATHLETIC 8
194 BELLEVUE AVE. NEWPORT, RI 02840	13-6144356	501(C)(3)	40,000.				EDUCATION PROGRAM
(2) JAMES LEWIS EDUCATION AND TENNIS FOUND. INC							COMMUNITY ATHLETIC &
429 GREEN SPRINGS HWY BIRMINGHAM, AL 35209	63-1140766	501(C)(3)	16,000.				EDUCATION PROGRAM
(3) JUNIOR TENNIS CHAMPIONS CENTER							COMMUNITY ATHLETIC &
5200 CAMPUS DRIVE COLLEGE PARK, MD 20740	52-2114223	501(C)(3)	99,150.				EDUCATION PROGRAM
(4) KAMAU MURRAY FOUNDATION							COMMUNITY ATHLETIC 8
11740 S. LONGWOOD CHICAGO, IL 60643	26-1734791	501(C)(3)	42,600.				EDUCATION PROGRAM
(5) KIDS PLAY TENNIS COMMUNITY OUTREACH PROGRAM							COMMUNITY ATHLETIC 8
725 WEDGEWOOD RD BETHLEHEM, PA 18017	46-4593623	501(C)(3)	8,500.				EDUCATION PROGRAM
(6) KIMBERLY PARK TENNIS ASSOCIATION							COMMUNITY ATHLETIC 8
5752 WINDWORTH DR WINSTON SALEM, NC 27106	84-2018333	501(C)(3)	12,500.				EDUCATION PROGRAM
(7) LAKES REGION TENNIS ASSOCIATION							COMMUNITY ATHLETIC 8
36 COUNTRY CLUB ROAD GILFORD, NH 03249	46-2774258	501(C)(3)	41,500.				EDUCATION PROGRAM
(8) LEGACY YOUTH TENNIS AND EDUCATION							COMMUNITY ATHLETIC 8
4842 RIDGE AVE. PHILAPELPHIA, PA 19129	23-1747032	501(C)(3)	95,500.				EDUCATION PROGRAM
(9) LENNY SIMPSON TENNIS AND EDUCATION FOUND.							COMMUNITY ATHLETIC 8
1406 ORANGE ST WILMINGTON, NC 28401	46-1952014	501(C)(3)	20,000.				EDUCATION PROGRAM
(10) LET'S TEACH, INC.							COMMUNITY ATHLETIC 8
920 LOHMAN LANE SOUTH PASADENA, CA 91030	27-1713645	501(C)(3)	10,000.				EDUCATION PROGRAM
(11) LOVE & LOVE TENNIS FOUNDATION INC.							COMMUNITY ATHLETIC 8
810 SNOW CREEK CANYON PALM DESERT, CA 92211	47-5128532	501(C)(3)	10,000.				EDUCATION PROGRAM
(12) LOVE TO SERVE INC.							COMMUNITY ATHLETIC 8
3400 WEST 111TH ST. CHICAGO, IL 60655	36-3846086	501(C)(3)	42,000.				EDUCATION PROGRAM
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations list	-	•					

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

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

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Open to Public Inspection

Employer identification number

USTA FOUNDATION INCORPORATED						13-3782331	
Part I General Information on Grants an	d Assistanc	е					
 Does the organization maintain records to s the selection criteria used to award the gran Describe in Part IV the organization's proce 	ts or assistand	e?					Yes No
Part II Grants and Other Assistance to Depart IV, line 21, for any recipient to	Oomestic Or	ganizations a	nd Domestic Gov	vernments. Com			es" on Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) MACH ACADEMY							COMMUNITY ATHLETIC 8
1850 CHESTER AVE. AUGUSTA, GA 30906	58-2013645	501(C)(3)	104,500.				EDUCATION PROGRAM
(2) MACON TENNIS ASSOCIATION							COMMUNITY ATHLETIC 8
3280 N. INGLE PLACE MACON, GA 31210	58-1928690	501(C)(4)	10,000.				EDUCATION PROGRAM
(3) MALIVAI WASHINGTON KIDS FOUND, INC.							COMMUNITY ATHLETIC 8
1055 WEST 6TH ST JACKSONVILLE, FL 32209	59-3559150	501(C)(3)	67,000.				EDUCATION PROGRAM
(4) MARCY TENNIS CLUB INC.							COMMUNITY ATHLETIC 8
1 DOCK 72 WAY, 7TTH FL BROOKLYN, NY 11205	27-3170420	501(C)(3)	88,500.				EDUCATION PROGRAM
(5) MARTY HENNESSY INSPIRING CHILDREN FOUND.							COMMUNITY ATHLETIC 8
1101 COLORADO ST BOULDER CITY, NV 90005	20-1638145	501(C)(3)	74,050.				EDUCATION PROGRAM
(6) MCADAMS NJTL OF WICHITA FOUNDATION							COMMUNITY ATHLETIC 8
10305 E. PEPPERTREE CT. WICHITA, KS 67226	74-3221100	501(C)(3)	6,000.				EDUCATION PROGRAM
(7) METROPOLITAN TENNIS AND EDUCATION GROUP							COMMUNITY ATHLETIC 8
13142 BROOKTREE LANE LAUREL, MD 20707	46-1950434	501(C)(3)	146,400.				EDUCATION PROGRAM
(8) MILWAUKEE TENNIS AND EDUCATION FOUND. INC.							COMMUNITY ATHLETIC 8
3000 N SHERMAN BLVD. MILWAUKEE, WI 53210	39-1317061	501(C)(3)	43,500.				EDUCATION PROGRAM
(9) MOTOR CITY TENNIS CLUB							COMMUNITY ATHLETIC 8
25234 MAPLEBROOKE DR SOUTHFIELD, MI 48033	38-3135342	501(C)(3)	16,800.				EDUCATION PROGRAM
(10) MULTICULTURAL TENNIS ASSOCIATION, INC.							COMMUNITY ATHLETIC 8
5455 S FORT APACHE RD., LAS VEGAS, NV 89148	47-4054781	501(C)(3)	6,000.				EDUCATION PROGRAM
(11) NATIONAL JR TENNIS & LEARN. OF INDIANAPOLIS							COMMUNITY ATHLETIC 8
1310 E 96TH ST INDIANAPOLIS, IN 46240	31-0892167	501(C)(3)	25,000.				EDUCATION PROGRAM
(12) NEHEMIAH GATEWAY COMMUNITY DEVELOPMENT CORP							COMMUNITY ATHLETIC &
215 W 23RD ST WILMINGTON, DE 19802	52-2238147	501(C)(3)	10,000.				EDUCATION PROGRAM
 Enter total number of section 501(c)(3) and Enter total number of other organizations lis 	J	· ·					

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

2021

OMB No. 1545-0047

Department of the Treasury

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

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Name of the organization Employer identification number USTA FOUNDATION INCORPORATED 13-3782331 **General Information on Grants and Assistance** 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Yes No the selection criteria used to award the grants or assistance? 2 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. (f) Method of valuation (book, FMV, appraisal, other) (c) IRC section 1 (a) Name and address of organization (b) EIN (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant (if applicable) grant cash assistance noncash assistance or assistance or government (1) NEW HAVEN YOUTH TENNIS, INC. COMMUNITY ATHLETIC & PO BOX 2928 NEW HAVEN, CT 06515 27-0772846 501(C)(3) 40,000. EDUCATION PROGRAM (2) NEW VENTURE FUND COMMUNITY ATHLETIC & 1828 L STREET NW, WASHINGTON, DC 20036 20-5806345 501(C)(3) 7,508 EDUCATION PROGRAM (3) NEW YORK EDGE INC. COMMINITY ATHLETIC & 58-12 QUEENS BLVD., WOODSIDE, NY 11377 11-3112635 501(C)(3) 10,000. EDUCATION PROGRAM (4) NEWBURGH JUNIOR TENNIS & LEARNING CHAMPIONS COMMUNITY ATHLETIC & 11,000. 310 CHANDLER LANE MONTGOMERY, NY 12549 85-2525473 501(C)(3) EDUCATION PROGRAM (5) NEXT LEVEL TENNIS AND EDUCATION COMMUNITY ATHLETIC & 1219 OWENS PLACE NE WASHINGTON, DC 20002 83-1210312 501(C)(3) 6,000 EDUCATION PROGRAM (6) NJTL OF BENNINGTON VT, INC. COMMUNITY ATHLETIC & 200 LOVERS LANE BENNINGTON, VT 05201 81-3129525 501(C)(3) 53,000. EDUCATION PROGRAM (7) NJTL OF FORT COLLINS COMMUNITY ATHLETIC & 501(C)(3) 871 S. LANE ESTES PARK, CO 80517 82-3586810 36,000 EDUCATION PROGRAM (8) NJTL OF TRENTON COMMINITY ATHLETIC & 949 W. STATE ST. TRENTON, NJ 08618 52-1260470 501(C)(3) 52,685 EDUCATION PROGRAM (9) NORWALK GRASSROOTS TENNIS INC. COMMUNITY ATHLETIC & 11 INGALLS AVE. NORWALK, CT 06854 06-1570097 501(C)(3) 39,500 EDUCATION PROGRAM (10) NYJTL COMMUNITY ATHLETIC & 36-36 33RD ST., LONG ISLAND CITY, NY 11106 23-7442256 501(C)(3) 105,225 EDUCATION PROGRAM (11) OPPORTUNITY TENNIS ACADEMY COMMUNITY ATHLETIC & 1136 SHADOWLAWN INKSTER, MI 48141 83-4326611 501(C)(3) 11,200. EDUCATION PROGRAM (12) PASADENA TENNIS ASSOCIATION INC. COMMUNITY ATHLETIC & P.O. BOX 50609 PASADENA, CA 91115 95-4637372 501(C)(3) 17,500. EDUCATION PROGRAM

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

Schedule I (Form 990) 2021

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

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Schedule I (Form 990) 2021

Name of the organization						Employer identificat	ion number
USTA FOUNDATION INCORPORATED						13-3782331	
Part I General Information on Grants and	d Assistanc	е					
 Does the organization maintain records to so the selection criteria used to award the grant Describe in Part IV the organization's proced Part II Grants and Other Assistance to D Part IV, line 21, for any recipient the 	s or assistand dures for mor omestic Or	ce? nitoring the use ganizations a r	of grant funds in th	e United States.	nplete if the organiz	ation answered "Y	Yes No
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) PEOPLE FOR PALMER PARK							COMMUNITY ATHLETIC 8
PO BOX 43735 DETROIT, MI 48243	27-4528966	501(C)(3)	7,500.				EDUCATION PROGRAM
(2) PETE BROWN JR. TENNIS PROGRAM	4						COMMUNITY ATHLETIC &
PO BOX 8114 LOS ANGELES, CA 90008	80-0800003	501(C)(3)	64,900.				EDUCATION PROGRAM
(3) PODER ACADEMY INC.	_						COMMUNITY ATHLETIC &
2201 MARRIE AVE CHEYENNE, WY 82001	45-4736621	501(C)(3)	7,500.				EDUCATION PROGRAM
(4) PORTLAND TENNIS & EDUCATION	_						COMMUNITY ATHLETIC &
7519 N. BURLINGTON AVE. PORTLAND, OR 97203	93-1256066	501(C)(3)	62,500.				EDUCATION PROGRAM
(5) POSH ROCK TENNIS FOUNDATION	_						COMMUNITY ATHLETIC &
527 BELLE FERN CT OCOEE, FL 34761	82-1570811	501(C)(3)	56,000.				EDUCATION PROGRAM
(6) PRINCE GEORGE'S TENNIS & EDU. FOUND., INC.							COMMUNITY ATHLETIC 8
727 HAACK PLACE LARGO, MD 20774	52-1867742	501(C)(3)	20,000.				EDUCATION PROGRAM
(7) PUBLIC TENNIS, INC.							COMMUNITY ATHLETIC 8
PO BOX 6381 HILTON HEAD ISLAND, SC 29938	57-1120848	501(C)(3)	31,000.				EDUCATION PROGRAM
(8) RALEIGH TENNIS ASSOCIATION							COMMUNITY ATHLETIC 8
6325 FALLS OF NEUSE RD., RALEIGH, NC 27615	20-2930399	501(C)(3)	20,000.				EDUCATION PROGRAM
(9) READING RECREATION COMMISSION							COMMUNITY ATHLETIC 8
320 SOUTH 3RD ST READING, PA 19602	38-3860043	501(C)(3)	23,500.				EDUCATION PROGRAM
(10) ROCKINGHAM COUNTY TENNIS ASSOC.							COMMUNITY ATHLETIC 8
PO BOX 201 MADISON, NC 27025	47-1834568	501(C)(3)	7,500.				EDUCATION PROGRAM
(11) RODNEY STREET TENNIS & TUTORING ASSOCIATION							COMMUNITY ATHLETIC 8
101 GARDEN OF EDEN RD. WILMINGTON, DE 19803	01-0652445	501(C)(3)	81,500.				EDUCATION PROGRAM
(12) SAN ANTONIO TENNIS ASSOCIATION							COMMUNITY ATHLETIC 8
1503 SAN PEDRO AVE SAN ANTONIO, TX 78212	74-6062875	501(C)(3)	6,000.				EDUCATION PROGRAM
2 Enter total number of section 501(c)(3) and 3 Enter total number of other organizations list	•	•					

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

2021

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

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

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

Open to Public Inspection

Employer identification number

USTA FOUNDATION INCORPORATED						13-3782331	
Part I General Information on Grants a	nd Assistanc	е					
 Does the organization maintain records to the selection criteria used to award the gra Describe in Part IV the organization's process. 	nts or assistand	e?			• •		Yes No
Part II Grants and Other Assistance to Part IV, line 21, for any recipient		_					es" on Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) SANDY SPRINGS TENNIS ASSOCIATION							COMMUNITY ATHLETIC 8
8343 ROSWELL RD., SANDY SPRINGS, GA 30350	26-1667052	501(C)(3)	7,500.				EDUCATION PROGRAM
(2) SARAH VANDE BERG TENNIS FOUNDATION INC.							COMMUNITY ATHLETIC &
6272 ABBOT STATION DR ZEPHYRHILLS, FL 33641	83-0784419	501(C)(3)	13,500.				EDUCATION PROGRAM
(3) SEATTLE TENNIS AND EDUCATION FOUNDATION							COMMUNITY ATHLETIC &
PO BOX 15402 SEATTLE, WA 98109	82-3479495	501(C)(3)	25,000.				EDUCATION PROGRAM
(4) SIERRA JUNIOR TENNIS ASSOCIATION							COMMUNITY ATHLETIC &
PO BOX 6928 RENO, NV 89513	05-0538007	501(C)(3)	25,000.				EDUCATION PROGRAM
(5) SLOANE STEPHENS FOUNDATION							COMMUNITY ATHLETIC &
511 SE 5TH AVE., FT. LAUDERDALE, FL 33301	36-4760242	501(C)(3)	172,141.				EDUCATION PROGRAM
(6) SOUTH ATLANTA CTA							COMMUNITY ATHLETIC 8
6320 COLONIAL VIEW FAIRBURN, GA 30213	58-1885686	501(C)(3)	129,075.				EDUCATION PROGRAM
(7) SOUTHSIDE AREA TENNIS ASSOCIATION							COMMUNITY ATHLETIC 8
163 HAWTHORNE DRIVE DANVILLE, VA 24541	82-2963545	501(C)(3)	6,000.				EDUCATION PROGRAM
(8) SPORTSMEN'S TENNIS CLUB ENRICHMENT CENTER							COMMUNITY ATHLETIC 8
950 BLUE HILL AVE. DORCHESTER, MA 02124	23-7037183	501(C)(3)	94,500.				EDUCATION PROGRAM
(9) SPRING BRANCH TENNIS ASSOCIATION							COMMUNITY ATHLETIC 8
PO BOX 445 SPRING BRANCH, TX 78070	26-1421941	501(C)(3)	16,500.				EDUCATION PROGRAM
(10) SPRINGS TENNIS NON-PROFIT CORP							COMMUNITY ATHLETIC 8
895 WESTMORELAND RD., COLORADO SPRINGS, CO	84-2280969	501(C)(3)	12,000.				EDUCATION PROGRAM
(11) ST. GEORGE YOUTH SPORTS LEAGUE							COMMUNITY ATHLETIC &
215 PARK ST. SAINT GEORGE, SC 29477	45-2978042	501(C)(3)	22,000.				EDUCATION PROGRAM
(12) ST. PAUL URBAN TENNIS PROGRAM							COMMUNITY ATHLETIC 8
1675 5TH ST. E SAINT PAUL, MN 55106	41-1725010	501(C)(3)	27,500.				EDUCATION PROGRAM

1E1288 1.000

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

2021

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

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

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Open to Public Inspection

Schedule I (Form 990) 2021

Employer identification number

USTA FOUNDATION INCORPORATED						13-3782331	
Part I General Information on Grants a	ınd Assistanc	е					
 Does the organization maintain records to the selection criteria used to award the gra Describe in Part IV the organization's prod 	ants or assistand	e?					Yes No
Part II Grants and Other Assistance to Part IV, line 21, for any recipient		_			. •		es" on Form 990,
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) STEAMBOAT TENNIS ASSOCIATION							COMMUNITY ATHLETIC &
P.O. BOX 770533 STEAMBOAT SPRINGS, CO 80477	36-4627623	501(C)(3)	17,500.				EDUCATION PROGRAM
(2) STEPHANIE WATERMAN FOUNDATION							COMMUNITY ATHLETIC 8
PO BOX 10776 KANSAS CITY, MO 64188	43-1394444	501(C)(3)	17,500.				EDUCATION PROGRAM
(3) TENACITY, INC.							COMMUNITY ATHLETIC &
38 EVERETT ST. BOSTON, MA 02134	04-3452763	501(C)(3)	85,000.	20,000.	FMV	COURT REFURBISHMENT	EDUCATION PROGRAM
(4) TENNIS AND TUTORING PROGRAM							COMMUNITY ATHLETIC &
951 E. BERNAY CIRCLE SANDY, UT 84094	45-4999860	501(C)(3)	20,000.				EDUCATION PROGRAM
(5) TENNIS CENTRAL							COMMUNITY ATHLETIC &
1023 HUNTERS PATH LANCASTER, PA 17601	23-2223007	501(C)(3)	16,000.				EDUCATION PROGRAM
(6) TENNIS MEMPHIS, INC.							COMMUNITY ATHLETIC &
4145 SOUTHERN AVE. MEMPHIS, TN 38117	52-2362589	501(C)(3)	17,500.				EDUCATION PROGRAM
(7) TENNIS OPPORTUNITY PROGRAM INC.							COMMUNITY ATHLETIC 8
332 S. MICHIGAN AVE., CHICAGO, IL 60604	36-3652224	501(C)(3)	32,500.				EDUCATION PROGRAM
(8) TENNIS SUCCESS INC.							COMMUNITY ATHLETIC 8
PO BOX 71647 CORPUS CHRISTI, TX 78467	06-1725402	501(C)(3)	31,000.				EDUCATION PROGRAM
(9) THE ACTIVE CHILDREN EXCEL PROJECT, INC.							COMMUNITY ATHLETIC 8
PO BOX 304 WESTMONT, IL 60559	37-1710751	501(C)(3)	66,000.				EDUCATION PROGRAM
(10) THE CHAMPIONSHIP FOUNDATION, INC.							COMMUNITY ATHLETIC &
402 CIVIC CENTER DRIVE ROME, GA 30161	26-3005107	501(C)(3)	7,500.				EDUCATION PROGRAM
(11) THE URBAN LEAGUE OF SPRINGFIELD, INC.							COMMUNITY ATHLETIC 8
1 FEDERAL ST. SPRINGFIELD, MA 01105	04-2133248	501(C)(3)	10,000.				EDUCATION PROGRAM
(12) TODD MARTIN DEVELOPMENT FUND							COMMUNITY ATHLETIC 8
200 N FOSTER AVE. LANSING, MI 48912	81-0583592	501(C)(3)	35,185.				EDUCATION PROGRAM
2 Enter total number of section 501(c)(3) an3 Enter total number of other organizations	•	•					

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

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

Open to Public Inspection

Schedule I (Form 990) 2021

Name of the organization						Employer identificat	ion number
USTA FOUNDATION INCORPORATED						13-3782331	
Part I General Information on Grants an	d Assistanc	е					
 Does the organization maintain records to s the selection criteria used to award the gran Describe in Part IV the organization's proces Part II Grants and Other Assistance to D	ts or assistand dures for mor	e? nitoring the use	of grant funds in th	e United States.			Yes No
Part IV, line 21, for any recipient t	hat received	more than \$5	,000. Part II can	be duplicated if a	additional space is n	eeded.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) USTA MIDWEST TENNIS & EDUCATION FOUNDATION							COMMUNITY ATHLETIC 8
1310 E 96TH ST INDIANAPOLIS, IN 46240	35-1875466	501(C)(3)	10,000.				EDUCATION PROGRAM
(2) USTA PLAYER DEVELOPMENT INC.							COMMUNITY ATHLETIC &
70 WEST RED OAK LANE WHITE PLAINS, NY 10604	27-1368195	501(C)(3)	153,000.				EDUCATION PROGRAM
(3) VIRGINIA COMMONWEALTH UNIVERSITY							COMMUNITY ATHLETIC 8
120 S LINDEN ST RICHMOND, VA 23220	54-6001758	501(C)(3)	15,000.				EDUCATION PROGRAM
(4) WACO TENNIS ASSOC.							COMMUNITY ATHLETIC 8
PO BOX 21411 WACO, TX 76702	74-1783545	501(C)(3)	6,000.				EDUCATION PROGRAM
(5) WASHINGTON TENNIS & EDUCATION FOUNDATION							COMMUNITY ATHLETIC 8
5220 16TH ST. NW WASHINGTON, DC 20011	52-6046504	501(C)(3)	57,000.				EDUCATION PROGRAM
(6) YMCA OF GREATER ROCHESTER							COMMUNITY ATHLETIC 8
444 EAST MAIN ST. ROCHESTER, NY 14604	16-0743242	501(C)(3)	10,000.				EDUCATION PROGRAM
(7) YOUTH DEVELOPMENT ASSOCIATION, INC.							COMMUNITY ATHLETIC 8
118 LEGACY COVE DR., MADISON, AL 35756	63-1073577	501(C)(3)	27,685.				EDUCATION PROGRAM
(8) YOUTH TENNIS ADVANTAGE							COMMUNITY ATHLETIC 8
PO BOX 330458 SAN FRANCISCO, CA 94133	94-2293585	501(C)(3)	42,000.				EDUCATION PROGRAM
(9) YOUTH TENNIS SAN DIEGO							COMMUNITY ATHLETIC 8
4490 W POINT LOMA BLVD SAN DIEGO, CA 92107	95-6095644	501(C)(3)	95,685.				EDUCATION PROGRAM
(10) ZINA GARRISON ACADEMY							COMMUNITY ATHLETIC 8
1333 OLD SPANISH TRAIL, HOUSTON, TX 77054	76-0371254	501(C)(3)	41,000.				EDUCATION PROGRAM
(11)							
(12)							
2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations lis	•	•					

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 COLLEGE EDUCATION	22	207,250.			
2 DONNELLY	9	51,200.			
3 davenport character awards	8	40,000.			
4 DWIGHT MOSLEY	2	25,000.			
5 NORA MCNEELY HURLEY LEADERSHIP	2	25,000.			
6 DWIGHT F. DAVIS MEMORIAL	2	20,000.			
7 ROSALIND P. WALTER	2	20,000.			

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 professional tennis management	2	20,000.			
2 marian wood baird	1	15,000.			
3 EVE KRAFT	1	2,500.			
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

PART I, LINE 2:

SCHOLARSHIP RECIPIENTS ARE REQUIRED TO ANNUALLY SUBMIT A COPY OF THEIR TRANSCRIPTS, INDICATING THAT THEY ARE IN GOOD STANDING. GRANT RECIPIENTS ARE REQUIRED TO SUBMIT DETAILED FINAL REPORTS DESCRIBING THE PROGRESS OF THEIR PROPOSED GOALS. WHEN POSSIBLE, A REPRESENTATIVE OF THE USTA FOUNDATION OR RESPECTIVE USTA SECTION MONITORS AND/OR VISITS THE FUNDED ORGANIZATION.

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. 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

USTA FOUNDATION INCORPORATED

Department of the Treasury

Internal Revenue Service

Employer identification number

13-3782331

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	X First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2	Х	
3	Indicate which, if any, of the following the organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
•	payments not described on lines 5 and 6? If "Yes," describe in Part III.	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	a		

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

Schedule J (Form 990) 2021

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(B) Breakdown of			nd/or 1099-MISC and/or	1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
DANIEL FABER	(i)	NONE	NONE	NONE	NONE	NONE	NONE	NONE	
1 EXECUTIVE DIRECTOR	(ii)	265,656.	54,859.	774.	19,886.	39,777.	380,952.	NONE	
	(i)								
_ 2	(ii)								
	(i)								
_ 3	(ii)								
	(i)								
4	(ii)								
	(i)								
_ 5	(ii)								
	(i)								
6	(ii)								
	(i)								
_ 7	(ii)								
	(i)								
8	(ii)								
	(i)								
9	(ii)								
	(i)								
10	(ii)								
	(i)								
_11	(ii)								
	(i)								
12	(ii)								
	(i)								
_13	(ii)								
	(i)								
14	(ii)								
	(i)								
15	(ii)								
	(i)								
16	(ii)								

13-3782331

13-3782331

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

IN ACCORDANCE WITH THE TRAVEL POLICY, EMPLOYEES ABOVE DIRECTOR LEVEL ARE ENTITLED TO BUSINESS CLASS AIRFARES FOR FLIGHTS GREATER THAN FIVE HOURS.

IN THE EVENT BUSINESS CLASS AIRFARE IS NOT AVAILABLE, THE ABOVE INDIVIDUALS ARE ENTITLED TO FIRST CLASS UNDER THE ASSOCIATION'S ACCOUNTABLE EXPENSE REIMBURSEMENT PLAN.

PART I, LINE 3:

THE UNITED STATES TENNIS ASSOCIATION ("USTA"), A 501(C)(6) AFFILIATE OF
THE REPORTING ORGANIZATION, PAID COMPENSATION TO THE REPORTING
ORGANIZATION'S TOP MANAGEMENT OFFICIAL. USTA HAS ESTABLISHED THE
COMPENSATION OF THE TOP MANAGEMENT OFFICIAL USING COMPENSATION COMMITTEE,
INDEPENDENT COMPENSATION CONSULTANT, FORM 990 OF OTHER ORGANIZATIONS,
COMPENSATION SURVEY OR STUDY, AND APPROVAL BY THE BOARD OR COMPENSATION
COMMITTEE.

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.

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

13-3782331

USTA FOUNDATION INCORPORATED

FORM 990, PART VI, SECTION A, LINES 6, 7A AND 7B:

THE UNITED STATES TENNIS ASSOCIATION ("USTA") IS THE SOLE MEMBER OF USTA FOUNDATION AND IS AUTHORIZED TO ELECT UP TO 20% OF THE TOTAL NUMBER OF DIRECTORS OF USTA FOUNDATION. PURSUANT TO THE BYLAWS OF USTA FOUNDATION, THE SOLE MEMBER HAS THE RIGHT TO REMOVE DIRECTORS WITH OR WITHOUT CAUSE, TO FILL VACANCIES IN THE BOARD OF DIRECTORS, AND TO AMEND THE CERTIFICATE OF INCORPORATION AND THE BYLAWS OF USTA FOUNDATION. IN ADDITION, THE SOLE MEMBER HAS THE RIGHT TO APPROVE OR RATIFY CERTAIN DECISIONS OF THE BOARD OF DIRECTORS OF USTA FOUNDATION (SUCH AS THE DECISION TO MERGE OR DISSOLVE) PURSUANT TO THE NEW YORK NOT-FOR-PROFIT CORPORATION LAW.

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 WAS PREPARED BY A NATIONALLY RECOGNIZED ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S FINANCIAL DEPARTMENT. THE FORM 990 WAS REVIEWED IN DETAIL BY MANAGEMENT. AFTER REVIEW, THE FORM 990 IS PRESENTED TO AND REVIEWED BY THE AUDIT COMMITTEE. THE FORM 990 IS ALSO DISTRIBUTED TO THE FULL BOARD OF DIRECTORS PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO OFFICERS, DIRECTORS,
AND KEY EMPLOYEES PRIOR TO APPOINTMENT OR EMPLOYMENT AND ANNUALLY
THEREAFTER ALONG WITH A QUESTIONNAIRE THAT IS COMPLETED BY ALL OFFICERS
AND DIRECTORS IN WHICH THEY ARE ASKED SPECIFIC QUESTIONS AND DISCLOSE
INFORMATION REGARDING ACTUAL OR POTENTIAL CONFLICTS BETWEEN USTA
FOUNDATION AND THEMSELVES OR CERTAIN RELATED PARTIES (AS DEFINED IN THE
INSTRUCTIONS TO THE FORM 990). THESE QUESTIONNAIRES ARE COLLECTED AND
REVIEWED ANNUALLY TO ENSURE COMPLIANCE WITH THE CONFLICT OF INTEREST

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.

OMB No. 1545-0047

2021

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Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection
Employer identification number

POLICY. THE POLICY ITSELF ALSO REQUIRES ANY DIRECTOR OR OFFICER TO

PROMPTLY DISCLOSE ANY CONFLICT. INTERESTED DIRECTORS AND OFFICERS ARE

REQUIRED TO RECUSE THEMSELVES FROM ANY DECISION ON MATTERS IN WHICH THEY

HAVE AN INTEREST, AND SUCH RECUSAL IS NOTED IN THE MINUTES.

FORM 990, PART VI, SECTION B, LINES 15A AND 15B:

USTA FOUNDATION, INC. DOES NOT COMPENSATE ITS EXECUTIVE DIRECTOR NOR ANY OF ITS OFFICERS. HOWEVER, IF IT WERE TO COMPENSATE ITS EXECUTIVE DIRECTOR OR ANY OFFICERS IT WOULD PUT INTO PLACE A PROCESS FOR DETERMINING COMPENSATION THAT WOULD INCLUDE REVIEW AND APPROVAL BY INDEPENDENT PERSONS, COMPARABILITY DATA, AND CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION. FOR RELATED ENTITY DISCLOSURES REFER TO THE RELATED ENTITY 990 FOR A DESCRIPTION OF THE COMPENSATION REVIEW.

FORM 990, PART VI, SECTION C, LINE 19:

THE PUBLIC CAN OBTAIN THE ORGANIZATION'S FORM 990 AND ITS AUDITED FINANCIAL STATEMENTS ON THE ORGANIZATION'S WEBSITE OR UPON REQUEST. IN ADDITION, THE BYLAWS, CONFLICT OF INTEREST POLICY AND RETENTION POLICIES ARE AVAILABLE UPON REQUEST FROM THE ORGANIZATION.

FORM 990, PART VII, SECTION A:

DANIEL FABER, EXECUTIVE DIRECTOR, WAS PAID EXCLUSIVELY BY THE USTA, A RELATED 501(C)(6) ORGANIZATION. THE W-2 WAS ISSUED BY THE USTA.

Name of the organization

USTA FOUNDATION INCORPORATED

13-3782331

FORM 990, PART III - PROGRAM SERVICE

LINE 4A, PROGRAM SERVICE

THE USTA FOUNDATION PROVIDES PROGRAM AND OPERATIONAL SUPPORT GRANTS TO SUPPORT THE IMPLEMENTATION OF QUALIFIED EDUCATIONAL CURRICULA AND IMPROVED TENNIS DELIVERY. PREFERENCE IS GIVEN TO NJTL CHAPTERS, SERVING UNDER-RESOURCED DEMOGRAPHICS. IN 2021, A TOTAL OF \$4,976,096 WAS GRANTED TO 119 ORGANIZATIONS. HIGHLIGHTS OF THE PROGRAMS THAT WERE FUNDED INCLUDE THE FOLLOWING:

NJTL CAPACITY BUILDING:

THE USTA FOUNDATION CAPACITY BUILDING PROGRAM IS BASED ON THE NEEDS OF THE NJTL CHAPTERS AS REPORTED IN THEIR ANNUAL ENROLLMENT SURVEY. THE PROGRAM IS DESIGNED TO ADDRESS CHAPTER NEEDS TO SUPPORT ORGANIZATIONAL GROWTH IN SUSTAINABILITY, GOVERNANCE, MANAGEMENT INFRASTRUCTURE, LEADERSHIP DEVELOPMENT AND PROGRAMMATIC IMPACT ON UNDER RESOURCED YOUTH.

NATIONAL ESSAY CONTEST, LITERACY, HEALTH & STEM:
THE USTA FOUNDATION PROVIDES EVIDENCE-BASED CURRICULA TO NJTL
CHAPTERS GEARED TOWARDS ELEMENTARY, MIDDLE AND HIGH SCHOOL
STUDENTS. THE ENRICHMENT LESSONS COMPLEMENT NATIONAL EDUCATIONAL
STANDARDS AND USE RECREATION (TENNIS) AS A FOUNDATION FOR LEARNING
VALUABLE LITERACY, HEALTH, SCIENCE, TECHNOLOGY, ENGINEERING AND
MATHEMATICS (STEM) COMPETENCIES. THE NATIONAL ESSAY CONTEST IS AN
OPPORTUNITY FOR NJTL PARTICIPANTS TO PUT THEIR LITERACY SKILLS
INTO PRACTICAL USE. UNDER-RESOURCED CONTESTANTS ARE SELECTED BASED
ON THE MERIT OF THEIR ESSAYS AND WIN AN ALL-EXPENSE PAID TRIP TO
THE US OPEN IN NEW YORK CITY.

EXCELLENCE PROGRAM:

THE USTA FOUNDATION WORKS IN PARTNERSHIP WITH NATIONAL JUNIOR TENNIS & LEARNING (NJTL) CHAPTERS AND OTHER ENTITIES TO IDENTIFY, TRAIN, AND EDUCATE THE NEXT GENERATION OF AMERICAN TENNIS CHAMPIONS, NATIONAL LEVEL COMPETITORS, COLLEGIATE PLAYERS AND FUTURE LEADERS. EXCELLENCE TEAMS ARE DESIGNED TO BREAK FINANCIAL BARRIERS BY PROVIDING QUALITY COACHING, EQUIPMENT AND TOURNAMENT TRAVEL AT NO COST TO UNDER-SERVED JUNIOR PLAYERS FROM UNDER-RESOURCED POPULATIONS.

Name of the organization

USTA FOUNDATION INCORPORATED

13-3782331

FORM 990, PART VI, LINE 17 - STATES

AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OR, PA, RI, SC, TN, UT, VA, WV, WI, Name of the organization
USTA FOUNDATION INCORPORATED
Employer identification number
13-3782331

FORM 990, PART VII-COMPENSATION OF THE 5 HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION

OASIS SPORTS VENTURES 7 EAST 35TH STREET, #12A

NEW YORK, NY 10016 CONSULTING 132,535.

EIGEN X LLC

170 N. RADNOR CHESTER ROAD, SUITE 150

RADNOR, PA 19087 CONSULTING 120,378.

Name of the organization			Employer identificatio	n number
USTA FOUNDATION INCORPO	RATED		13-3782331	
				_
FORM 990, PART IX - OTHER FEES				
=======================================				
	(A)	(B)	(C)	(D)
	TOTAL	PROGRAM	MANAGEMENT	FUNDRAISING
DESCRIPTION	FEES	SERVICE EXP.	AND GENERAL	EXPENSES
CONSULTANTS	875,588.	434,923.	75,422.	365,243.
TOTALS				
	875,588.	434,923.	75,422.	365,243.

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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

OMB No. 1545-0047
ഐ∙ 4
2021
Open to Public
•
Inspection

Name of the organization

USTA FOUNDATION INCORPORATED

Employer identification number 13-3782331

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling
1)					
2)					
3)					
4)					
s)					
6)					
Identification of Related Tax-Exempt Organizations. Comp			000 D (1)	<u> </u>	21 1

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5	g) 512(b)(13) rolled tity?
						Yes	No
(1) UNITED STATES TENNIS ASSOCIATION, INC. 13-5459420							
70 W RED OAK LANE WHITE PLAINS, NY 10604	TENNIS	NY	501(C)(6)	N/A	N/A		Х
(2) USTA NATIONAL TENNIS CENTER, INC. 13-2946690							
70 W RED OAK LANE WHITE PLAINS, NY 10604	TENNIS PARK	NY	501(C)(3)	10	USTA		Х
(3) USTA PLAYER DEVELOPMENT, INC. 27-1368195							
70 W RED OAK LANE WHITE PLAINS, NY 10604	TENNIS	NY	501(C)(3)	12A	USTA		Х
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2021

because it had one of more related organizations treated as a partnership during the tax year.														
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	year assets allocations? amount in box of Schedule K		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Code V - UBI General G		ox 20 managing K-1 partner?		(k) Percentage ownership
			oouy,		,			Yes	No		Yes	No		
(1)														
(2)		-												
(3)														
(4)														
(5)														
(6)														
(7)														

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

				<u> </u>			
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

No	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
		1b	Х	
С	Gift, grant, or capital contribution from related organization(s)	1c	Х	
	Loans or loan guarantees to or for related organization(s)	1d		Χ
е		1e		Х
f	Dividends from related organization(s)	1f		Χ
g	Sale of assets to related organization(s)	1g		Х
		1h		Х
	Exchange of assets with related organization(s)	1i		Х
	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
•				
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х
	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
		1m		Х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Х	
	0 (/	10		
g	Reimbursement paid to related organization(s) for expenses	1р	Х	
		1q		Х
•				
r	Other transfer of cash or property to related organization(s)	1r		Х
		1s		Х
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thres	holds	S.	

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) UNITED STATES TENNIS ASSOCIATION, INC.	N	308,406.	FMV
(2) UNITED STATES TENNIS ASSOCIATION, INC.	0	2,333,951.	FMV
(3) UNITED STATES TENNIS ASSOCIATION, INC.	Р	67,355.	CASH
(4) USTA PLAYER DEVELOPMENT, INC.	В	153,000.	CASH
(5)			
(6)			

Schedule R (Form 990) 2021

13-3782331

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	income (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General o managing partner?		g ownership	
			sections 512 - 514)	Yes	No			Yes No	No	,	Yes	No		
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
(11)														
(12)														
(13)														
(14)														
(15)														
(16)														