

Form **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 Inspection

A For the 2021 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization USTA FOUNDATION INCORPORATED			D Employer identification number 13-3782331	
	Doing Business As			E Telephone number (914) 696-7000	
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 70 W RED OAK LANE				
	City or town, state or province, country, and ZIP or foreign postal code WHITE PLAINS, NY 10604				
F Name and address of principal officer: KATHLEEN WU 70 W RED OAK LANE, WHITE PLAINS, NY 10604			G Gross receipts \$ 14,736,394.		
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)		
J Website: WWW.USTAFFOUNDATION.COM			H(c) Group exemption number ▶		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1994 M State of legal domicile: NY		

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>TO BRING TENNIS & EDUCATION TOGETHER TO CHANGE LIVES, WITH PARTICULAR EMPHASIS ON UNDER-RESOURCED YOUTH. USING THIS POWERFUL COMBINATION, WE HELP SERVE UP DREAMS.</u>	
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a) 3 15
	4	Number of independent voting members of the governing body (Part VI, line 1b) 4 15
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 NONE
	6	Total number of volunteers (estimate if necessary) 6 50
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 7a NONE
7b	Net unrelated business taxable income from Form 990-T, line 34 7b NONE	
Revenue	8	Contributions and grants (Part VIII, line 1h) 8 8,162,868. 14,388,559.
	9	Program service revenue (Part VIII, line 2g) 9 NONE NONE
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 12. 97,169.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 NONE 15,976.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 8,162,880. 14,501,704.
	Expenses	13
14		Benefits paid to or for members (Part IX, column (A), line 4) 14 NONE NONE
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 NONE NONE
16a		Professional fundraising fees (Part IX, column (A), line 11e) 16a 11,667. 28,000.
16b		Total fundraising expenses (Part IX, column (D), line 25) 16b 862,086.
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 1,356,497. 1,490,399.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 5,365,361. 6,920,445.	
19	Revenue less expenses. Subtract line 18 from line 12 19 2,797,519. 7,581,259.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16) 20 12,635,565. 21,092,938.
	21	Total liabilities (Part X, line 26) 21 1,146,954. 1,818,259.
	22	Net assets or fund balances. Subtract line 21 from line 20. 22 11,488,611. 19,274,679.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	PAUL HAMMERSCHMIDT	<i>Paul Hammerschmidt</i>	6/17/2022
	Firm's name ▶ BDO USA, LLP	Firm's EIN ▶ 13-5381590	Check <input type="checkbox"/> if self-employed
	Firm's address ▶ 100 PARK AVENUE, NEW YORK, NY 10017-5001	Phone no. 212-885-8000	PTIN P01384178
May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2021)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:

TO BRING TENNIS & EDUCATION TOGETHER TO CHANGE LIVES, WITH PARTICULAR EMPHASIS ON UNDER-RESOURCED YOUTH. USING THIS POWERFUL COMBINATION, WE HELP SERVE UP DREAMS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 5,500,406. including grants of \$ 4,976,096.) (Revenue \$ NONE) SEE SCHEDULE O

4b (Code:) (Expenses \$ 425,950. including grants of \$ 425,950.) (Revenue \$ NONE) THE USTA FOUNDATION AWARDS COLLEGE EDUCATIONAL SCHOLARSHIPS ANNUALLY TO HIGH SCHOOL SENIORS WHO HAVE EXCELLED ACADEMICALLY, DEMONSTRATED COMMUNITY SERVICE AND PARTICIPATED IN AN ORGANIZED TENNIS PROGRAM. PREFERENCE IS GIVEN TO NJTL PARTICIPANTS AND AWARDS ARE BETWEEN \$2,500 TO \$15,000, SPREAD OVER FOUR YEARS. IN 2021, A TOTAL OF \$425,950 IN SCHOLARSHIPS WERE PROVIDED TO 51 PARTICIPANTS.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 5,926,356.

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Yes, No. Rows 1-21 with various questions about organizational activities and financial reporting. Includes sub-questions 11a-f and 12a-b.

Part IV Checklist of Required Schedules (continued)

	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b 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? <i>If "Yes," complete Schedule L, Part I.</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to 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? <i>If "Yes," complete Schedule L, Part II.</i>		X
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? <i>If "Yes," complete Schedule L, Part III</i>		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):		
28a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV.</i>		X
28c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		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? <i>If "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b 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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	X	
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
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.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
1b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable.		
1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee reporting, tax returns, gross income, foreign accounts, prohibited transactions, and charitable trusts.

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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (15), 1b (15), 2 (X), 3 (X), 4 (X), 5 (X), 6 (X), 7a (X), 7b (X), 8a (X), 8b (X), 9 (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a (X), 10b, 11a (X), 11b, 12a (X), 12b (X), 12c (X), 13 (X), 14 (X), 15a (X), 15b (X), 16a (X), 16b.

Section 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 (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

USTA ACCOUNTING DEPT, 70 W RED OAK LANE, WHITE PLAINS, NY 10604
914-696-7000

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

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

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.
 - 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 per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DANIEL FABER EXECUTIVE DIRECTOR	40.00 5.00			X				NONE	321,289.	59,663.
(2) BRIAN HAINLINE DIRECTOR	3.00 14.00	X						NONE	25,000.	NONE
(3) VIOLET CLARK DIRECTOR	3.00 13.00	X						NONE	20,000.	NONE
(4) KURT ZUMWALT DIRECTOR	3.00 8.00	X						NONE	10,000.	NONE
(5) KATHLEEN WU PRESIDENT/DIRECTOR	10.00 NONE	X		X				NONE	NONE	NONE
(6) MOLLY JOHN DIRECTOR/VICE-PRESIDENT	3.00 NONE	X		X				NONE	NONE	NONE
(7) JAMES MAJESKI DIRECTOR/VICE-PRESIDENT	3.00 NONE	X		X				NONE	NONE	NONE
(8) DAVID SCHARF DIRECTOR/TREASURER	3.00 NONE	X		X				NONE	NONE	NONE
(9) RICHARD ADER DIRECTOR/SECRETARY	3.00 NONE	X		X				NONE	NONE	NONE
(10) THOMAS CHEN DIRECTOR	3.00 NONE	X						NONE	NONE	NONE
(11) BENJAMIN DOLLER DIRECTOR	3.00 NONE	X						NONE	NONE	NONE
(12) JULIA LEVERING DIRECTOR	3.00 NONE	X						NONE	NONE	NONE
(13) ROBERT OBERRENDER DIRECTOR	3.00 NONE	X						NONE	NONE	NONE
(14) MISSIE RENNIE DIRECTOR	3.00 NONE	X						NONE	NONE	NONE

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) RAJ VASWANI DIRECTOR	3.00 NONE	X					NONE	NONE	NONE	
(16) IVAN ZINN DIRECTOR	3.00 NONE	X					NONE	NONE	NONE	
1b Sub-total							NONE	376,289.	59,663.	
c Total from continuation sheets to Part VII, Section A							NONE	NONE	NONE	
d Total (add lines 1b and 1c)							NONE	376,289.	59,663.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **NONE**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
SEE SCHEDULE O		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **2**

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	3,014,505.				
	d	Related organizations	1d					
	e	Government grants (contributions) . .	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	11,374,054.				
	g	Noncash contributions included in lines 1a-1f	1g	\$				
	h	Total. Add lines 1a-1f ▶		14,388,559.				
	Program Service Revenue	2a	_____	Business Code				
b		_____						
c		_____						
d		_____						
e		_____						
f		All other program service revenue						
g		Total. Add lines 2a-2f ▶		NONE				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		97,169.			97,169.	
	4	Income from investment of tax-exempt bond proceeds . ▶		NONE				
	5	Royalties ▶		NONE				
	6a	Gross rents	6a	(i) Real	(ii) Personal			
	b	Less: rental expenses	6b					
	c	Rental income or (loss)	6c	NONE	NONE			
	d	Net rental income or (loss) ▶		NONE				
	7a	Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other			
	b	Less: cost or other basis and sales expenses . .	7b					
	c	Gain or (loss)	7c					
	d	Net gain or (loss) ▶		NONE				
8a	Gross income from fundraising events (not including \$ 3,014,505. of contributions reported on line 1c). See Part IV, line 18	8a		250,666.				
			8b	234,690.				
			c	Net income or (loss) from fundraising events ▶	15,976.		15,976.	
9a	Gross income from gaming activities. See Part IV, line 19	9a		NONE				
			9b	NONE				
			c	Net income or (loss) from gaming activities ▶	NONE			
10a	Gross sales of inventory, less returns and allowances	10a		NONE				
			10b	NONE				
			c	Net income or (loss) from sales of inventory ▶	NONE			
Miscellaneous Revenue	11a	_____	Business Code					
	b	_____						
	c	_____						
	d	All other revenue						
	e	Total. Add lines 11a-11d ▶		NONE				
12	Total revenue. See instructions ▶		14,501,704.			113,145.		

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 X

Do not include amounts reported on lines 6b, 7b, 8b, 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			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	NONE			
9 Other employee benefits	NONE			
10 Payroll taxes	NONE			
11 Fees for services (nonemployees):				
a Management	NONE			
b Legal	13,939.			13,939.
c Accounting	NONE			
d Lobbying	NONE			
e Professional fundraising services. See Part IV, line 17	28,000.			28,000.
f Investment management fees	NONE			
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	SEE SCHE 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 Travel	119,384.	45,924.	10,574.	62,886.
18 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.
20 Interest	NONE			
21 Payments to affiliates	NONE			
22 Depreciation, depletion, and amortization	NONE			
23 Insurance	NONE			
24 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.)				
a 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.
25 Total functional expenses. Add lines 1 through 24e	6,920,445.	5,926,356.	132,003.	862,086.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	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
	7 Notes and loans receivable, net	NONE	7	NONE
	8 Inventories for sale or use	NONE	8	NONE
	9 Prepaid expenses and deferred charges	29,508.	9	49,127.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation.	10b		
	11 Investments - publicly traded securities.	1,052,288.	11	3,399,277.
	12 Investments - other securities. See Part IV, line 11	NONE	12	NONE
	13 Investments - program-related. See Part IV, line 11.	NONE	13	NONE
	14 Intangible assets	NONE	14	NONE
	15 Other assets. See Part IV, line 11	NONE	15	NONE
16 Total assets. Add lines 1 through 15 (must equal line 33)	12,635,565.	16	21,092,938.	
Liabilities	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	20	NONE
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	NONE	21	NONE
	22 Loans and other payables to 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	22	NONE
	23 Secured mortgages and notes payable to unrelated third parties	NONE	23	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.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions.	9,801,614.	27	11,951,940.
	28 Net assets with donor restrictions.	1,686,997.	28	7,322,739.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	11,488,611.	32	19,274,679.
33 Total liabilities and net assets/fund balances.	12,635,565.	33	21,092,938.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	14,501,704.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,920,445.
3	Revenue less expenses. Subtract line 2 from line 1	3	7,581,259.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	11,488,611.
5	Net unrealized gains (losses) on investments	5	204,809.
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	19,274,679.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits . . .

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

**SCHEDULE A
(Form 990)**

Department of the Treasury
Internal Revenue Service

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**

Name of the organization USTA FOUNDATION INCORPORATED	Employer identification number 13-3782331
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar 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.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	11,739,882.	6,214,296.	7,676,037.	8,162,868.	14,388,559.	48,181,642.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	98,905.	195,650.	177,250.	48,785.	97,169.	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. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	64.11 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	80.04 %
16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization.		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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.)

Section A. Public Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income; 13 Total support.

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, 2021, 2020. Row 15: Public support percentage for 2021; Row 16: Public support percentage from 2020 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, 2021, 2020. Row 17: Investment income percentage for 2021; Row 18: Investment income percentage from 2020 Schedule A, Part III, line 17.

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here.

19b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here.

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
10a 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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 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?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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	(B) Current Year (optional)
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	

Section 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	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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	

Section 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	Enter greater of line 2 or line 3.	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 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

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 - <i>explain in Part VI</i>). See instructions.			
3	Excess distributions carryover, if any, to 2021			
a	From 2016			
b	From 2017			
c	From 2018			
d	From 2019			
e	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: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
c	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, <i>explain in Part VI</i> . See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2017			
b	Excess from 2018			
c	Excess from 2019			
d	Excess from 2020			
e	Excess from 2021			

**Schedule B
(Form 990)**

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990 or Form 990-PF.**
▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2021

Name of the organization

Employer identification number

USTA FOUNDATION INCORPORATED

13-3782331

Organization type (check one):

Filers of:

Section:

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 totaling \$5,000 or more during the year ▶ \$ _____

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).

Name of organization <p style="text-align: center;">USTA FOUNDATION INCORPORATED</p>	Employer identification number <p style="text-align: center;">13-3782331</p>
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization

Employer identification number

USTA FOUNDATION INCORPORATED

13-3782331

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Line number, Description, (a) Donor advised funds, (b) Funds and other accounts. Includes rows for total number at end of year, aggregate values, and yes/no questions about donor advisement.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Line number, Description, and Held at the End of the Tax Year. Includes rows for purpose(s) of easements, total number, acreage, and monitoring expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Line number, Description, and Amount. Includes rows for art/historical treasures held for public service and those received for financial gain.

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

Schedule D (Form 990) 2021

JSA 1E1268 1.000

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, 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.
d Grants or scholarships	15,000.	15,000.	15,000.	2,000.	15,000.
e Other expenditures for facilities and programs				35,398.	
f Administrative expenses					
g End of year balance	321,544.	318,084.	338,733.	299,591.	354,332.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment 100.0000 %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------------------------|-------------------------------------|
| (i) Unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | <input type="checkbox"/> | <input type="checkbox"/> |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				

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.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include (1) Financial derivatives, (2) Closely held equity interests, (3) Other (A-H), and Total.

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

Table with 3 columns: (a) Description of investment, (b) Book value, (c) Method of valuation. Rows (1) through (9) and Total.

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

Table with 2 columns: (a) Description, (b) Book value. Rows (1) through (9) and Total.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

Table with 2 columns: (a) Description of liability, (b) Book value. Row 1 includes (1) Federal income taxes, and rows (2) through (9) and Total.

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]

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.

**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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.

2021

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

**Open to Public
Inspection**

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

Name of the organization

Employer identification number

USTA FOUNDATION INCORPORATED

13-3782331

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
SEE SUPPLEMENT INFORMATION 1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				NONE	28,000.	NONE

3 List all states in which the organization is registered or licensed 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, WI,

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events		
		GALA (event type)	US OPEN PRO AM (event type)	3 (total number)	(add col. (a) through col. (c))		
Revenue	1	Gross receipts	2,278,622.	499,540.	487,009.	3,265,171.	
	2	Less: Contributions	2,206,222.	387,640.	420,643.	3,014,505.	
	3	Gross income (line 1 minus line 2)	72,400.	111,900.	66,366.	250,666.	
Direct Expenses	4	Cash prizes					
	5	Noncash prizes					
	6	Rent/facility costs					
	7	Food and beverages	8,164.	7,882.	31,244.	47,290.	
	8	Entertainment					
	9	Other direct expenses	28,000.	122,200.	37,200.	187,400.	
	10	Direct expense summary. Add lines 4 through 9 in column (d)					234,690.
	11	Net income summary. Subtract line 10 from line 3, column (d)					15,976.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b 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?

NO

GROSS RECEIPTS FROM ACTIVITY : NONE

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

AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION : NONE

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990.

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

Name of the organization

USTA FOUNDATION INCORPORATED

Employer identification number

13-3782331

Part I 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 the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 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.

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 PO BOX 43063 CLEVELAND, OH 44143	27-1789893	501(C)(3)	48,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(2) ADVANTAGE LANCASTER 1100 E. ORANGE ST. LANCASTER, PA 17603	05-0527280	501(C)(3)	25,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(3) A'S & ACES 1036 ARABELLA ST. NEW ORLEANS, LA 70115	26-1905295	501(C)(3)	36,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(4) ATLANTA COMMUNITY TENNIS FOUNDATION, INC. 6075 THE CORNERS PKWY, PEACHTREE CORNERS, GA	04-3750678	501(C)(3)	34,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(5) BIRMINGHAM AREA TENNIS ASSOCIATION PO BOX 131114 BIRMINGHAM, AL 35213	63-1241128	501(C)(3)	19,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(6) BORDER YOUTH TENNIS EXCHANGE, INC. PO BOX 367 NOGALES, AZ 85628	82-1211390	501(C)(3)	52,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(7) BOYS & GIRLS CLUB OF SOUTH OAKLAND COUNTY 1545 EAST LINCOLN ROYAL OAK, MI 48067	38-1579180	501(C)(3)	21,750.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(8) BOYS AND GIRLS CLUB OF CHESTER 201 EAST 7TH ST CHESTER, PA 19013	23-1490049	501(C)(3)	7,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(9) BRUNSWICK COUNTY TENNIS ASSOC. 1374 LIBERTY LANDING RD. WINNABOW, NC 28479	56-2276562	501(C)(3)	10,600.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(10) BULLARD FAMILY FOUNDATION INC.. 5308 VAN DYKE RD. LUTZ, FL 33558	82-5519212	501(C)(3)	10,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(11) CAPITAL REGION YOUTH TENNIS FOUNDATION INC. 785 WASHINGTON AVE. ALBANY, NY 12206	14-1733312	501(C)(3)	41,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(12) CENTRAL LINCOLN COUNTY YOUNG MENS CHRISTIAN 525 MAIN ST. DAMARICOTTA, ME 04543	22-2978129	501(C)(3)	10,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 128

3 Enter total number of other organizations listed in the line 1 table ▶ 2

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

Schedule I (Form 990) 2021

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

2021

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Name of the organization

Employer identification number

USTA FOUNDATION INCORPORATED

13-3782331

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 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.

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) CHATTANOOGA TENNIS ASSOCIATION PO BOX 23383 CHATTANOOGA, TN 37422	58-1351363	501(C)(3)	26,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(2) CITY AND COUNTY OF SAN FRANCISCO 501 STANYAN ST. SAN FRANCISCO, CA 94117	94-6000417	GOVERNMENT	10,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(3) CITY PARK RACQUET CLUB, INC. 1726 DOWNING ST. DENVER, CO 80218	74-2334935	501(C)(3)	15,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(4) CITY PARKS FOUNDATION 830 FIFTH AVE. NEW YORK, NY 10021	13-3561657	501(C)(3)	6,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(5) COLUMBUS REGIONAL TENNIS ASSOCIATION INC. PO BOX 8236 COLUMBUS, GA 31908	58-6043414	501(C)(3)	20,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(6) DALLAS TENNIS ASSOCIATION 14679 MIDWAY RD. STE. 104 ADDISON, TX 75001	75-6020581	501(C)(3)	124,740.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(7) DANBURY GRASSROOTS TENNIS INC. PO BOX 2912 DANBURY, CT 06813	20-4929313	501(C)(3)	25,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(8) DD & J JUNIOR TENNIS FOUNDATION 8016 LOCH LANE COLUMBIA, SC 29223	57-1031121	501(C)(3)	32,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(9) DELRAY BEACH YOUTH TENNIS FOUNDATION 11714 DUNES RD BOYNTON BEACH, FL 33436	47-5161144	501(C)(3)	10,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(10) DENVER TENNIS PARK INC. 1560 S. FRANKLIN ST. DENVER, CO 80210	82-0620668	501(C)(3)	20,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(11) DIRECTED INITIATIVES FOR YOUTH, INC. 1527 GAUSE BLVD., STE 220 SLIDELL, LA 70458	26-4459825	501(C)(3)	42,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(12) EAST PALO ALTO TENNIS & TUTORING PO BOX 60597 PALO ALTO, CA 94306	26-3316879	501(C)(3)	47,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM

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

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

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Schedule I (Form 990) 2021

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

2021

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Name of the organization

Employer identification number

USTA FOUNDATION INCORPORATED

13-3782331

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 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.

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) EASTERN COLORADO TENNIS ASSOCIATION 52583 COUNTRY RD #107 GROVER, CO 80729	87-2370993	501(C)(3)	7,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(2) ESSEX GRASSROOTS TENNIS & EDUCATION INC. 299 COLUMBIA TPKE FLORHAM PARK, NJ 07932	81-4507628	501(C)(3)	15,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(3) FAMILY BIZ BUILDER 1221 BONDS RD TUNICA, MS 38676	47-1483063	501(C)(3)	37,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(4) FAST CTA DBA CINCINNATI TENNIS FOUNDATION 3280 HARDISTY AVE. CINCINNATI, OH 45208	47-3682420	501(C)(3)	45,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(5) FIRST BREAK ACADEMY 18400 AVALON BLVD., CARSON, CA 90746	47-1940265	501(C)(3)	70,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(6) FIRST SERVE BRIDGEPORT INC. PO BOX 185574 HAMDEN, CT 06518	45-3867870	501(C)(3)	17,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(7) FIRST SERVE MIAMI INC. 12231 SW 129 COURT MIAMI, FL 33186	59-1603794	501(C)(3)	98,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(8) FIRST SERVE OKC FOUNDATION 3400 N PORTLAND AVE OKLAHOMA CITY, OK 73112	46-3499004	501(C)(3)	37,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(9) FIRST SERVE TULSA FOUNDATION PO BOX 33017 TULSA, OK 74153	84-4327796	501(C)(3)	6,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(10) FIRST SERVE-NEW MEXICO INC. 123 TANO NORTE SANTE FE, NM 87506	27-0044395	501(C)(3)	40,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(11) FLORENCE TENNIS ASSOCIATION PO BOX 12180 FLORENCE, SC 29505	58-2339034	501(C)(3)	6,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(12) FOUR ACES RACQUET CLUB INC. 18 BONDA DRIVE GREENVILLE, MS 38701	35-2368234	501(C)(3)	7,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM

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

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

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

Schedule I (Form 990) 2021

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

2021

**Open to Public
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Department of the Treasury
Internal Revenue Service

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Name of the organization

Employer identification number

USTA FOUNDATION INCORPORATED

13-3782331

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 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.

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) FRED WELLS TENNIS & EDUCATION CENTER, INC. 100 FEDERAL DRIVE ST. PAUL, MN 55111	41-1965977	501(C)(3)	34,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(2) FRONTLINE OUTREACH 3000 C R SMITH ST. ORLANDO, FL 32805	23-7227148	501(C)(3)	25,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(3) GAINESVILLE AREA COMMUNITY TENNIS ASSOC INC PO BOX 357492 GAINESVILLE, FL 32635	54-2158508	501(C)(3)	47,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(4) GOLDEN TRIANGLE TENNIS 155 BRELAND OVERLOOK COLUMBUS, MS 39701	82-2998953	501(C)(3)	15,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(5) GREATER NEWARK TENNIS & EDUCATION 1 CARLA COURT MORRISTOWN, NJ 07960	82-4810511	501(C)(3)	33,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(6) GREATER POTTSTOWN TENNIS AND LEARNING ASSOC 724 N ADAMS ST POTTSTOWN, PA 19464	45-5378964	501(C)(3)	36,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(7) GREENSBORO TENNIS FOUNDATION 3802 JAYCEE PARK DRIVE GREENSBORO, NC 27455	56-2040723	501(C)(3)	74,650.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(8) HARLEM JUNIOR TENNIS AND EDU. PROGRAM, INC. 40 WEST 143RD ST. NEW YORK, NY 10037	13-3076419	501(C)(3)	89,575.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(9) HOUSTON TENNIS ASSOCIATION 3535 BRIARPARK DR, #215 HOUSTON, TX 77042	74-6061090	501(C)(3)	64,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(10) HQ TENNIS FOUNDATION 450 ROCKAWAY PKWY, 1F BROOKLYN, NY 11212	81-3301812	501(C)(3)	19,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(11) INNERCITY TENNIS FOUNDATION 4005 NICOLLET AVE S MINNEAPOLIS, MN 55409	41-6038537	501(C)(3)	100,835.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(12) INTERCOLLEGIATE TENNIS COACHES ASSOC., INC. 1130 E UNIVERSITY DR #115 TEMPE, AZ 85281	74-2021178	501(C)(3)	5,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM

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Schedule I (Form 990) 2021

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

2021

**Open to Public
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Department of the Treasury
Internal Revenue Service

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Name of the organization

Employer identification number

USTA FOUNDATION INCORPORATED

13-3782331

Part I 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 the selection criteria used to award the grants or assistance? Yes No
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(1) INTERNATIONAL TENNIS HALL OF FAME 194 BELLEVUE AVE. NEWPORT, RI 02840	13-6144356	501(C)(3)	40,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(2) JAMES LEWIS EDUCATION AND TENNIS FOUND. INC 429 GREEN SPRINGS HWY BIRMINGHAM, AL 35209	63-1140766	501(C)(3)	16,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(3) JUNIOR TENNIS CHAMPIONS CENTER 5200 CAMPUS DRIVE COLLEGE PARK, MD 20740	52-2114223	501(C)(3)	99,150.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(4) KAMAU MURRAY FOUNDATION 11740 S. LONGWOOD CHICAGO, IL 60643	26-1734791	501(C)(3)	42,600.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(5) KIDS PLAY TENNIS COMMUNITY OUTREACH PROGRAM 725 WEDGEWOOD RD BETHLEHEM, PA 18017	46-4593623	501(C)(3)	8,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(6) KIMBERLY PARK TENNIS ASSOCIATION 5752 WINDWORTH DR WINSTON SALEM, NC 27106	84-2018333	501(C)(3)	12,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(7) LAKES REGION TENNIS ASSOCIATION 36 COUNTRY CLUB ROAD GILFORD, NH 03249	46-2774258	501(C)(3)	41,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(8) LEGACY YOUTH TENNIS AND EDUCATION 4842 RIDGE AVE. PHILADELPHIA, PA 19129	23-1747032	501(C)(3)	95,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(9) LENNY SIMPSON TENNIS AND EDUCATION FOUND. 1406 ORANGE ST WILMINGTON, NC 28401	46-1952014	501(C)(3)	20,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(10) LET'S TEACH, INC. 920 LOHMAN LANE SOUTH PASADENA, CA 91030	27-1713645	501(C)(3)	10,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(11) LOVE & LOVE TENNIS FOUNDATION INC. 810 SNOW CREEK CANYON PALM DESERT, CA 92211	47-5128532	501(C)(3)	10,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(12) LOVE TO SERVE INC. 3400 WEST 111TH ST. CHICAGO, IL 60655	36-3846086	501(C)(3)	42,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM

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(1) MACH ACADEMY 1850 CHESTER AVE. AUGUSTA, GA 30906	58-2013645	501(C)(3)	104,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(2) MACON TENNIS ASSOCIATION 3280 N. INGLE PLACE MACON, GA 31210	58-1928690	501(C)(4)	10,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(3) MALIVAI WASHINGTON KIDS FOUND, INC. 1055 WEST 6TH ST JACKSONVILLE, FL 32209	59-3559150	501(C)(3)	67,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(4) MARCY TENNIS CLUB INC. 1 DOCK 72 WAY, 7TH FL BROOKLYN, NY 11205	27-3170420	501(C)(3)	88,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(5) MARTY HENNESSY INSPIRING CHILDREN FOUND. 1101 COLORADO ST BOULDER CITY, NV 90005	20-1638145	501(C)(3)	74,050.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(6) MCADAMS NJTL OF WICHITA FOUNDATION 10305 E. PEPPERTREE CT. WICHITA, KS 67226	74-3221100	501(C)(3)	6,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(7) METROPOLITAN TENNIS AND EDUCATION GROUP 13142 BROOKTREE LANE LAUREL, MD 20707	46-1950434	501(C)(3)	146,400.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(8) MILWAUKEE TENNIS AND EDUCATION FOUND. INC. 3000 N SHERMAN BLVD. MILWAUKEE, WI 53210	39-1317061	501(C)(3)	43,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(9) MOTOR CITY TENNIS CLUB 25234 MAPLEBROOKE DR SOUTHFIELD, MI 48033	38-3135342	501(C)(3)	16,800.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(10) MULTICULTURAL TENNIS ASSOCIATION, INC. 5455 S FORT APACHE RD., LAS VEGAS, NV 89148	47-4054781	501(C)(3)	6,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(11) NATIONAL JR TENNIS & LEARN. OF INDIANAPOLIS 1310 E 96TH ST INDIANAPOLIS, IN 46240	31-0892167	501(C)(3)	25,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(12) NEHEMIAH GATEWAY COMMUNITY DEVELOPMENT CORP 215 W 23RD ST WILMINGTON, DE 19802	52-2238147	501(C)(3)	10,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM

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(1) NEW HAVEN YOUTH TENNIS, INC. PO BOX 2928 NEW HAVEN, CT 06515	27-0772846	501(C)(3)	40,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(2) NEW VENTURE FUND 1828 L STREET NW, WASHINGTON, DC 20036	20-5806345	501(C)(3)	7,508.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(3) NEW YORK EDGE INC. 58-12 QUEENS BLVD., WOODSIDE, NY 11377	11-3112635	501(C)(3)	10,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(4) NEWBURGH JUNIOR TENNIS & LEARNING CHAMPIONS 310 CHANDLER LANE MONTGOMERY, NY 12549	85-2525473	501(C)(3)	11,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(5) NEXT LEVEL TENNIS AND EDUCATION 1219 OWENS PLACE NE WASHINGTON, DC 20002	83-1210312	501(C)(3)	6,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(6) NJTL OF BENNINGTON VT, INC. 200 LOVERS LANE BENNINGTON, VT 05201	81-3129525	501(C)(3)	53,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(7) NJTL OF FORT COLLINS 871 S. LANE ESTES PARK, CO 80517	82-3586810	501(C)(3)	36,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(8) NJTL OF TRENTON 949 W. STATE ST. TRENTON, NJ 08618	52-1260470	501(C)(3)	52,685.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(9) NORWALK GRASSROOTS TENNIS INC. 11 INGALLS AVE. NORWALK, CT 06854	06-1570097	501(C)(3)	39,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(10) NYJTL 36-36 33RD ST., LONG ISLAND CITY, NY 11106	23-7442256	501(C)(3)	105,225.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(11) OPPORTUNITY TENNIS ACADEMY 1136 SHADOWLAWN INKSTER, MI 48141	83-4326611	501(C)(3)	11,200.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(12) PASADENA TENNIS ASSOCIATION INC. P.O. BOX 50609 PASADENA, CA 91115	95-4637372	501(C)(3)	17,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM

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(1) PEOPLE FOR PALMER PARK PO BOX 43735 DETROIT, MI 48243	27-4528966	501(C)(3)	7,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(2) PETE BROWN JR. TENNIS PROGRAM PO BOX 8114 LOS ANGELES, CA 90008	80-0800003	501(C)(3)	64,900.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(3) PODER ACADEMY INC. 2201 MARRIE AVE CHEYENNE, WY 82001	45-4736621	501(C)(3)	7,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(4) PORTLAND TENNIS & EDUCATION 7519 N. BURLINGTON AVE. PORTLAND, OR 97203	93-1256066	501(C)(3)	62,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(5) POSH ROCK TENNIS FOUNDATION 527 BELLE FERN CT OCOEE, FL 34761	82-1570811	501(C)(3)	56,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(6) PRINCE GEORGE'S TENNIS & EDU. FOUND., INC. 727 HAACK PLACE LARGO, MD 20774	52-1867742	501(C)(3)	20,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(7) PUBLIC TENNIS, INC. PO BOX 6381 HILTON HEAD ISLAND, SC 29938	57-1120848	501(C)(3)	31,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(8) RALEIGH TENNIS ASSOCIATION 6325 FALLS OF NEUSE RD., RALEIGH, NC 27615	20-2930399	501(C)(3)	20,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(9) READING RECREATION COMMISSION 320 SOUTH 3RD ST READING, PA 19602	38-3860043	501(C)(3)	23,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(10) ROCKINGHAM COUNTY TENNIS ASSOC. PO BOX 201 MADISON, NC 27025	47-1834568	501(C)(3)	7,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(11) RODNEY STREET TENNIS & TUTORING ASSOCIATION 101 GARDEN OF EDEN RD. WILMINGTON, DE 19803	01-0652445	501(C)(3)	81,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(12) SAN ANTONIO TENNIS ASSOCIATION 1503 SAN PEDRO AVE SAN ANTONIO, TX 78212	74-6062875	501(C)(3)	6,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM

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(1) SANDY SPRINGS TENNIS ASSOCIATION 8343 ROSWELL RD., SANDY SPRINGS, GA 30350	26-1667052	501(C)(3)	7,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(2) SARAH VANDE BERG TENNIS FOUNDATION INC. 6272 ABBOT STATION DR ZEPHYRHILLS, FL 33641	83-0784419	501(C)(3)	13,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(3) SEATTLE TENNIS AND EDUCATION FOUNDATION PO BOX 15402 SEATTLE, WA 98109	82-3479495	501(C)(3)	25,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(4) SIERRA JUNIOR TENNIS ASSOCIATION PO BOX 6928 RENO, NV 89513	05-0538007	501(C)(3)	25,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(5) SLOANE STEPHENS FOUNDATION 511 SE 5TH AVE., FT. LAUDERDALE, FL 33301	36-4760242	501(C)(3)	172,141.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(6) SOUTH ATLANTA CTA 6320 COLONIAL VIEW FAIRBURN, GA 30213	58-1885686	501(C)(3)	129,075.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(7) SOUTHSIDE AREA TENNIS ASSOCIATION 163 HAWTHORNE DRIVE DANVILLE, VA 24541	82-2963545	501(C)(3)	6,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(8) SPORTSMEN'S TENNIS CLUB ENRICHMENT CENTER 950 BLUE HILL AVE. DORCHESTER, MA 02124	23-7037183	501(C)(3)	94,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(9) SPRING BRANCH TENNIS ASSOCIATION PO BOX 445 SPRING BRANCH, TX 78070	26-1421941	501(C)(3)	16,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(10) SPRINGS TENNIS NON-PROFIT CORP 895 WESTMORELAND RD., COLORADO SPRINGS, CO	84-2280969	501(C)(3)	12,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(11) ST. GEORGE YOUTH SPORTS LEAGUE 215 PARK ST. SAINT GEORGE, SC 29477	45-2978042	501(C)(3)	22,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(12) ST. PAUL URBAN TENNIS PROGRAM 1675 5TH ST. E SAINT PAUL, MN 55106	41-1725010	501(C)(3)	27,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM

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(1) STEAMBOAT TENNIS ASSOCIATION P.O. BOX 770533 STEAMBOAT SPRINGS, CO 80477	36-4627623	501(C)(3)	17,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(2) STEPHANIE WATERMAN FOUNDATION PO BOX 10776 KANSAS CITY, MO 64188	43-1394444	501(C)(3)	17,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(3) TENACITY, INC. 38 EVERETT ST. BOSTON, MA 02134	04-3452763	501(C)(3)	85,000.	20,000.	FMV	COURT REFURBISHMENT	COMMUNITY ATHLETIC & EDUCATION PROGRAM
(4) TENNIS AND TUTORING PROGRAM 951 E. BERNAY CIRCLE SANDY, UT 84094	45-4999860	501(C)(3)	20,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(5) TENNIS CENTRAL 1023 HUNTERS PATH LANCASTER, PA 17601	23-2223007	501(C)(3)	16,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(6) TENNIS MEMPHIS, INC. 4145 SOUTHERN AVE. MEMPHIS, TN 38117	52-2362589	501(C)(3)	17,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(7) TENNIS OPPORTUNITY PROGRAM INC. 332 S. MICHIGAN AVE., CHICAGO, IL 60604	36-3652224	501(C)(3)	32,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(8) TENNIS SUCCESS INC. PO BOX 71647 CORPUS CHRISTI, TX 78467	06-1725402	501(C)(3)	31,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(9) THE ACTIVE CHILDREN EXCEL PROJECT, INC. PO BOX 304 WESTMONT, IL 60559	37-1710751	501(C)(3)	66,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(10) THE CHAMPIONSHIP FOUNDATION, INC. 402 CIVIC CENTER DRIVE ROME, GA 30161	26-3005107	501(C)(3)	7,500.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(11) THE URBAN LEAGUE OF SPRINGFIELD, INC. 1 FEDERAL ST. SPRINGFIELD, MA 01105	04-2133248	501(C)(3)	10,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(12) TODD MARTIN DEVELOPMENT FUND 200 N FOSTER AVE. LANSING, MI 48912	81-0583592	501(C)(3)	35,185.				COMMUNITY ATHLETIC & EDUCATION PROGRAM

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

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

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

Schedule I (Form 990) 2021

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990.

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

Name of the organization

Employer identification number

USTA FOUNDATION INCORPORATED

13-3782331

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 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.

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) USTA MIDWEST TENNIS & EDUCATION FOUNDATION 1310 E 96TH ST INDIANAPOLIS, IN 46240	35-1875466	501(C)(3)	10,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(2) USTA PLAYER DEVELOPMENT INC. 70 WEST RED OAK LANE WHITE PLAINS, NY 10604	27-1368195	501(C)(3)	153,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(3) VIRGINIA COMMONWEALTH UNIVERSITY 120 S LINDEN ST RICHMOND, VA 23220	54-6001758	501(C)(3)	15,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(4) WACO TENNIS ASSOC. PO BOX 21411 WACO, TX 76702	74-1783545	501(C)(3)	6,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(5) WASHINGTON TENNIS & EDUCATION FOUNDATION 5220 16TH ST. NW WASHINGTON, DC 20011	52-6046504	501(C)(3)	57,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(6) YMCA OF GREATER ROCHESTER 444 EAST MAIN ST. ROCHESTER, NY 14604	16-0743242	501(C)(3)	10,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(7) YOUTH DEVELOPMENT ASSOCIATION, INC. 118 LEGACY COVE DR., MADISON, AL 35756	63-1073577	501(C)(3)	27,685.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(8) YOUTH TENNIS ADVANTAGE PO BOX 330458 SAN FRANCISCO, CA 94133	94-2293585	501(C)(3)	42,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(9) YOUTH TENNIS SAN DIEGO 4490 W POINT LOMA BLVD SAN DIEGO, CA 92107	95-6095644	501(C)(3)	95,685.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(10) ZINA GARRISON ACADEMY 1333 OLD SPANISH TRAIL, HOUSTON, TX 77054	76-0371254	501(C)(3)	41,000.				COMMUNITY ATHLETIC & EDUCATION PROGRAM
(11)							
(12)							

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

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

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

Schedule I (Form 990) 2021

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.			

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

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.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

USTA FOUNDATION INCORPORATED

Compensation Information

For 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

2021

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Inspection**

Employer identification number

13-3782331

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| <input checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

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?

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.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment?
 - b** Participate in or receive payment from a supplemental nonqualified retirement plan?
 - c** Participate in or receive payment from an equity-based compensation arrangement?
- 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:

- a** The organization?
 - b** Any related organization?
- 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:

- a** The organization?
 - b** Any related organization?
- 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.

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.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a	X	
2	X	
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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.

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

Part III Supplemental Information

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)**

Department of the Treasury
Internal Revenue Service

Name of the organization

USTA FOUNDATION INCORPORATED

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

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Inspection**

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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)**

Department of the Treasury
Internal Revenue Service
Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

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

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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

Employer identification number

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

Employer identification number

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

Employer identification number

USTA FOUNDATION INCORPORATED

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 identification number

USTA FOUNDATION INCORPORATED

13-3782331

FORM 990, PART IX - OTHER FEES

=====

DESCRIPTION	(A) TOTAL FEES	(B) PROGRAM SERVICE EXP.	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING EXPENSES
-----	-----	-----	-----	-----
CONSULTANTS	875,588.	434,923.	75,422.	365,243.
TOTALS	----- 875,588. =====	----- 434,923. =====	----- 75,422. =====	----- 365,243. =====

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

USTA FOUNDATION INCORPORATED

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

2021

**Open to Public
Inspection**

Employer identification number

13-3782331

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(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 entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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	(g) Section 512(b)(13) controlled entity?	
						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		X
(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		X
(3) USTA PLAYER DEVELOPMENT, INC. 27-1368195 70 W RED OAK LANE WHITE PLAINS, NY 10604	TENNIS	NY	501(C)(3)	12A	USTA		X
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2021

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

(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	(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 or managing partner?		(k) Percentage ownership
							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.

(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	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
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?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses	X	
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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 thresholds.

(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.	O	2,333,951.	FMV
(3) UNITED STATES TENNIS ASSOCIATION, INC.	P	67,355.	CASH
(4) USTA PLAYER DEVELOPMENT, INC.	B	153,000.	CASH
(5)			
(6)			

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)	(d) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(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 or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													