

# PUBLIC DISCLOSURE

Form **990**

## Return of Organization Exempt From Income Tax

OMB No. 1545-0047

**2012**

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

**A For the 2012 calendar year, or tax year beginning** 07/01, 2012, and ending 06/30, 2013

**B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

**C** Name of organization

UNITED STATES SQUASH RACQUETS ASSOC., INC.

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

Room/suite

555 EIGHTH AVENUE

1102

City, town or post office, state, and ZIP code

NEW YORK, NY 10018-4311

**F** Name and address of principal officer:

KEVIN KLIPSTEIN

555 EIGHTH AVENUE, SUITE 1102 NEW YORK, NY 10018-4311

**D** Employer identification number

16-6050490

**E** Telephone number

(212) 268-4090

**G** Gross receipts \$ 3,716,933.

**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No

**H(b)** Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

**J** Website: ▶ USSQUASH.COM

**H(c)** Group exemption number ▶

**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶ **L** Year of formation: 1904 **M** State of legal domicile: NY

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b>	Briefly describe the organization's mission or most significant activities: U.S. SQUASH'S MISSION IS TO PROMOTE THE GAME OF SQUASH.		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	10.
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	10.
	<b>5</b>	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	<b>5</b>	17.
<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	250.	
<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0	
<b>7b</b>	Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0	
<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
			2,048,102.	657,678.
	<b>9</b>	Program service revenue (Part VIII, line 2g)	2,690,589.	2,613,068.
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	115,150.	127,837.
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	54,903.	174,233.
<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,908,744.	3,572,816.	
<b>Expenses</b>	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	134,366.	181,213.
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	934,137.	1,161,475.
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ 131,397.		
<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,173,548.	2,682,651.	
<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,242,051.	4,025,339.	
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	666,693.	-452,523.	
<b>Net Assets or Fund Balances</b>	<b>20</b>	Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
			3,761,246.	3,382,452.
	<b>21</b>	Total liabilities (Part X, line 26)	656,783.	670,682.
<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	3,104,463.	2,711,770.	

**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

Check ☐ if self-employed

PTIN

JAMES MULROY

P00024514

Firm's name ▶ WITHUMSMITH+BROWN, PC

Firm's EIN ▶ 22-2027092

Firm's address ▶ 1 SPRING STREET NEW BRUNSWICK, NJ 08901

Phone no. 732-828-1614

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

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UNITED STATES SQUASH RACQUETS ASSOC., INC.

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## Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III ☐

### 1 Briefly describe the organization's mission:

U.S. SQUASH'S MISSION IS TO ENHANCE PEOPLE'S HEALTH AND WELL BEING BY INCREASING PARTICIPATION IN SQUASH, TO ENRICH THE EXPERIENCES OF OUR MEMBERS OF ALL AGES, AND TO BUILD AWARENESS OF THE SPORT, VALUING EXCELLENCE, PROFESSIONALISM AND FISCAL RESPONSIBILITY.

### 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 ☒ No

If "Yes," describe these new services on Schedule O.

### 3 Did the organization ~~cease~~ conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ 3,159,301. including grants of \$ ) (Revenue \$ 1,856,124. )

ATTACHMENT 1

4b (Code: ) (Expenses \$ 307,720. including grants of \$ ) (Revenue \$ 726,434. )

AT ITS CORE, U.S. SQUASH IS A MEMBERSHIP ORGANIZATION, AND AS OF FEBRUARY 2010, THE ASSOCIATION HAS APPROXIMATELY 13,300 INDIVIDUAL MEMBERS AND 300 MEMBER CLUBS. THE STAFF WORKS WITH 35 LOCAL VOLUNTEER ASSOCIATIONS WITH BOARDS OF ABOUT 10 PEOPLE EACH.

4c (Code: ) (Expenses \$ 176,557. including grants of \$ ) (Revenue \$ 26,539. )

U.S. SQUASH ADMINISTERS THE OFFICIAL CERTIFICATION PROGRAMS FOR REFEREEING AND COACHING IN THE UNITED STATES, EACH WITH SEVERAL LEVELS OF CERTIFICATION.

### 4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses ► 3,643,578.

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## Part IV Checklist of Required Schedules

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .	<b>1</b> X	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . .	<b>2</b> X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .	<b>3</b>	X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .	<b>4</b>	X
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III . . . . .	<b>5</b>	X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I . . . . .	<b>6</b>	X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . . .	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .	<b>8</b>	X
<b>9</b> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV . . . . .	<b>9</b>	X
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . .	<b>10</b> X	
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI . . . . .	<b>11a</b> X	
<b>b</b> Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . . . . .	<b>11b</b>	X
<b>c</b> Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII . . . . .	<b>11c</b>	X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX . . . . .	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . .	<b>11e</b> X	
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X . . . . .	<b>11f</b> X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII . . . . .	<b>12a</b> X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional . . . . .	<b>12b</b>	X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	<b>14a</b>	X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . .	<b>14b</b>	X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV . . . . .	<b>15</b> X	
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV . . . . .	<b>16</b>	X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .	<b>17</b>	X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .	<b>18</b>	X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .	<b>20b</b>	

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## Part IV Checklist of Required Schedules (continued)

		Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	<b>21</b>	X	
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	<b>22</b>		X
<b>23</b> 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>	<b>23</b>	X	
<b>24 a</b> 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 25.</i>	<b>24a</b>		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<b>24b</b>		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<b>24c</b>		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	<b>24d</b>		
<b>25 a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> 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>	<b>25a</b>		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>	<b>25b</b>		X
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>	<b>26</b>		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>	<b>27</b>		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>	<b>28a</b>		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>	<b>28b</b>		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>	<b>28c</b>		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	<b>29</b>		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	<b>30</b>		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>	<b>31</b>		X
<b>32</b> 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>	<b>32</b>		X
<b>33</b> 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>	<b>33</b>		X
<b>34</b> 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>	<b>34</b>		X
<b>35 a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<b>35a</b>		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	<b>35b</b>		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	<b>36</b>		X
<b>37</b> 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>	<b>37</b>		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	<b>38</b>	X	

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## Part V

### Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V. ☐

		Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. . . . .	1a	87	
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. . . . .	1b	0	
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	X	
<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .	2a	17	
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). . . . .	2b	X	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .	3a		X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	3b		
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	4a		X
<b>b</b> If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. . . . .			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	5a		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .	5b		X
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T? . . . . .	5c		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . . . .	6a		X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	6b		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .	7a		X
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	7b		
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	7c		X
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	7d		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7e		X
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	7f		X
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	7g		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	7h		
<b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	8		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b> Did the organization make any taxable distributions under section 4966? . . . . .	9a		
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	9b		
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	10a		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	10b		
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>a</b> Gross income from members or shareholders . . . . .	11a		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .	11b		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	12a		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	12b		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? . . . . . <b>Note.</b> See the instructions for additional information the organization must report on Schedule O. . . . .	13a		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .	13b		
<b>c</b> Enter the amount of reserves on hand . . . . .	13c		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .	14a		X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .	14b		

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**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI. ☒ X

## Section A. Governing Body and Management

		Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year. . . . .	1a		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent . . . . .	1b		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .	2		X
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . . .	3		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .	4		X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .	5		X
<b>6</b> Did the organization have members or stockholders? . . . . .	6	X	
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .	7a	X	
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .	7b		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
<b>a</b> The governing body? . . . . .	8a	X	
<b>b</b> Each committee with authority to act on behalf of the governing body? . . . . .	8b	X	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .	9		X

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

		Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates? . . . . .	10a		X
<b>b</b> If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . .	10b		
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	11a	X	
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	12a	X	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	12b	X	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .	12c	X	
<b>13</b> Did the organization have a written whistleblower policy? . . . . .	13	X	
<b>14</b> Did the organization have a written document retention and destruction policy? . . . . .	14	X	
<b>15</b> Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
<b>a</b> The organization's CEO, Executive Director, or top management official . . . . .	15a	X	
<b>b</b> Other officers or key employees of the organization . . . . .	15b	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	16a		X
<b>b</b> If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	16b		

## Section C. Disclosure

**17** List the states with which a copy of this Form 990 is required to be filed NY

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☒ Own website    ☐ Another's website    ☒ Upon request    ☐ Other (explain in Schedule O)

**19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: KEVIN KLIPSTEIN 555 EIGHTH AVENUE, SUITE 1102 NEW YORK, NY 10018-4311 212-268-4090

JSA

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# PUBLIC DISCLOSURE

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

Check if Schedule O contains a response to any question in this Part VII ☐

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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			
(1) PETER LASUSA BOARD CHAIR	1.00	X		X				0	0	0
(2) RICHARD CHIN BOARD MEMBER	1.00	X						0	0	0
(3) DIANA DOWLING BOARD MEMBER	1.00	X						0	0	0
(4) JOHN FRY BOARD MEMBER	1.00	X						0	0	0
(5) AMRIT KANWAL BOARD MEMBER	1.00	X						0	0	0
(6) MEREDETH QUICK BOARD MEMBER	1.00	X						0	0	0
(7) EMILY LUNGSTRUM BOARD MEMBER	1.00	X						0	0	0
(8) TERENCE O'TOOLE BOARD MEMBER	1.00	X						0	0	0
(9) MARSHALL PAGON BOARD MEMBER	1.00	X						0	0	0
(10) TIMOTHY CONWAY BOARD MEMBER	1.00	X						0	0	0
(11) KEVIN KLIPSTEIN CEO	40.00			X				180,000.	0	12,188.
(12) MICHAEL FRIEDMAN IT DIRECTOR	40.00					X		105,000.	0	17,454.
(13) _____										
(14) _____										

UNITED STATES SQUASH RACQUETS ASSOC., INC.

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[illegible]

	Yes	No
3		X
4	X	
5		X

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

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## Part VIII Statement of Revenue

Check if Schedule O contains a response to any question 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, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b>				
	<b>b</b>	Membership dues . . . . .	<b>1b</b>				
	<b>c</b>	Fundraising events . . . . .	<b>1c</b>				
	<b>d</b>	Related organizations . . . . .	<b>1d</b>				
	<b>e</b>	Government grants (contributions) . .	<b>1e</b>				
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above .	<b>1f</b>	657,678.			
	<b>g</b>	Noncash contributions included in lines 1a-1f: \$					
	<b>h</b>	<b>Total. Add lines 1a-1f . . . . .</b>		657,678.			
Program Service Revenue				<b>Business Code</b>			
	<b>2a</b>	ENTRY FEES	713990	911,500.	911,500.		
	<b>b</b>	SPONSORSHIPS AND ROYALTIES	713990	555,767.	555,767.		
	<b>c</b>	SANCTIONING FEES	713990	321,783.	321,783.		
	<b>d</b>	COMMISSIONS AND LICENSING FEES	713990	30,510.	30,510.		
	<b>e</b>	PROGRAM FEES	713990	67,074.	67,074.		
	<b>f</b>	All other program service revenue . . . . .		726,434.	726,434.		
	<b>g</b>	<b>Total. Add lines 2a-2f . . . . .</b>		2,613,068.			
Other Revenue	<b>3</b>	Investment income (including dividends, interest, and other similar amounts). ATTACHMENT 2 . . . . .		54,052.			54,052.
	<b>4</b>	Income from investment of tax-exempt bond proceeds . . . . .		0			
	<b>5</b>	Royalties . . . . .		0			
			(i) Real (ii) Personal				
	<b>6a</b>	Gross rents . . . . .					
	<b>b</b>	Less: rental expenses . . . . .					
	<b>c</b>	Rental income or (loss) . . . . .					
	<b>d</b>	Net rental income or (loss) . . . . .		0			
	<b>7a</b>	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
			156,969.				
	<b>b</b>	Less: cost or other basis and sales expenses . . . . .		83,184.			
	<b>c</b>	Gain or (loss) . . . . .		73,785.			
	<b>d</b>	Net gain or (loss) . . . . .		73,785.			
	<b>8a</b>	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>a</b>				
	<b>b</b>	Less: direct expenses . . . . .	<b>b</b>				
	<b>c</b>	Net income or (loss) from fundraising events . . . . .		0			
	<b>9a</b>	Gross income from gaming activities. See Part IV, line 19 . . . . .	<b>a</b>				
	<b>b</b>	Less: direct expenses . . . . .	<b>b</b>				
<b>c</b>	Net income or (loss) from gaming activities . . . . .		0				
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>	47,860.				
<b>b</b>	Less: cost of goods sold . . . . .	<b>b</b>	60,933.				
<b>c</b>	Net income or (loss) from sales of inventory . . . . .		-13,073.				
<b>Miscellaneous Revenue</b>				<b>Business Code</b>			
<b>11a</b>	OTHER REVENUE	900099	16,213.	16,213.			
<b>b</b>	MANAGEMENT FEES	900099	171,093.	171,093.			
<b>c</b>							
<b>d</b>	All other revenue . . . . .						
<b>e</b>	<b>Total. Add lines 11a-11d . . . . .</b>		187,306.				
<b>12</b>	<b>Total revenue. See instructions . . . . .</b>		3,572,816.	2,800,374.		54,052.	

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## 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 to any question in this Part IX ☐

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>				
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 . . . . .	106,213.	106,213.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22 . . . . .	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 . . . . .	75,000.	75,000.		
4 Benefits paid to or for members . . . . .	0			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	200,538.	110,296.	70,188.	20,054.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0			
7 Other salaries and wages . . . . .	785,114.	729,739.	2,625.	52,750.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	20,517.	19,081.	615.	821.
9 Other employee benefits . . . . .	83,229.	80,340.	601.	2,288.
10 Payroll taxes . . . . .	72,077.	68,804.	314.	2,959.
11 Fees for services (non-employees):				
a Management . . . . .	0			
b Legal . . . . .	2,189.	1,905.	107.	177.
c Accounting . . . . .	119,290.	20,342.	97,057.	1,891.
d Lobbying . . . . .	0			
e Professional fundraising services. See Part IV, line 17 . . . . .	0			
f Investment management fees . . . . .	14,065.	12,239.	688.	1,138.
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . . .	0			
12 Advertising and promotion . . . . .	0			
13 Office expenses . . . . .	75,835.	62,862.	6,960.	6,013.
14 Information technology . . . . .	0			
15 Royalties . . . . .	0			
16 Occupancy . . . . .	109,912.	94,786.	5,736.	9,390.
17 Travel . . . . .	23,951.	21,016.	1,107.	1,828.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0			
19 Conferences, conventions, and meetings . . . . .	5,331.	4,639.	261.	431.
20 Interest . . . . .	1,286.		1,286.	
21 Payments to affiliates . . . . .	0			
22 Depreciation, depletion, and amortization . . . . .	38,262.	990.	37,180.	92.
23 Insurance . . . . .	0			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>EVENTS AND TEAMS</u> . . . . .	1,898,952.	1,898,952.		
b <u>CREDIT CARD FEES</u> . . . . .	88,795.	77,174.	4,382.	7,239.
c <u>SQUASH MAGAZINE</u> . . . . .	130,362.	113,813.	5,764.	10,785.
d <u>WEBSITE</u> . . . . .	102,183.	89,101.	4,499.	8,583.
e All other expenses . . . . .	72,238.	56,286.	10,994.	4,958.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	4,025,339.	3,643,578.	250,364.	131,397.
26 <b>Joint costs.</b> 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) . . . . .	0			

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UNITED STATES SQUASH RACQUETS ASSOC., INC.

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## Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X ☐

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing	424,476.	<b>1</b>	188,812.
	2 Savings and temporary cash investments	0	<b>2</b>	0
	3 Pledges and grants receivable, net	511,023.	<b>3</b>	356,681.
	4 Accounts receivable, net	128,688.	<b>4</b>	108,368.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	<b>5</b>	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	<b>6</b>	0
	7 Notes and loans receivable, net	0	<b>7</b>	0
	8 Inventories for sale or use	38,816.	<b>8</b>	42,496.
	9 Prepaid expenses and deferred charges	128,467.	<b>9</b>	133,516.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	110,011.		
	10b Less: accumulated depreciation	79,997.		
		25,145.	<b>10c</b>	30,014.
	11 Investments - publicly traded securities	2,281,724.	<b>11</b>	2,319,988.
	12 Investments - other securities. See Part IV, line 11	0	<b>12</b>	0
	13 Investments - program-related. See Part IV, line 11	0	<b>13</b>	0
	14 Intangible assets	112,281.	<b>14</b>	87,965.
15 Other assets. See Part IV, line 11	110,626.	<b>15</b>	114,612.	
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	3,761,246.	<b>16</b>	3,382,452.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	203,708.	<b>17</b>	210,121.
	18 Grants payable	0	<b>18</b>	0
	19 Deferred revenue	434,559.	<b>19</b>	446,146.
	20 Tax-exempt bond liabilities	0	<b>20</b>	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	<b>21</b>	0
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	<b>22</b>	0
	23 Secured mortgages and notes payable to unrelated third parties	0	<b>23</b>	0
	24 Unsecured notes and loans payable to unrelated third parties	0	<b>24</b>	0
	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	18,516.	<b>25</b>	14,415.
	26 <b>Total liabilities.</b> Add lines 17 through 25	656,783.	<b>26</b>	670,682.
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	191,488.	<b>27</b>	62,610.
	28 Temporarily restricted net assets	651,818.	<b>28</b>	387,074.
	29 Permanently restricted net assets	2,261,157.	<b>29</b>	2,262,086.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		<b>30</b>	
	31 Paid-in or capital surplus, or land, building, or equipment fund		<b>31</b>	
	32 Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
	33 Total net assets or fund balances	3,104,463.	<b>33</b>	2,711,770.
34 <b>Total liabilities and net assets/fund balances.</b>	3,761,246.	<b>34</b>	3,382,452.	

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# PUBLIC DISCLOSURE

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## Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	3,572,816.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	4,025,339.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	-452,523.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	3,104,463.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	59,830.
<b>6</b>	Donated services and use of facilities	<b>6</b>	0
<b>7</b>	Investment expenses	<b>7</b>	0
<b>8</b>	Prior period adjustments	<b>8</b>	0
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	2,711,770.

## Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII ☐

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>2a</b>	X
<b>b</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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>2b</b>	X
<b>c</b> 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 in Schedule O.	<b>2c</b>	X
<b>3a</b> 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>3a</b>	X
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<b>3b</b>	

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# PUBLIC DISCLOSURE

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

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. ▶ See separate instructions.

OMB No. 1545-0047

2012

Open to Public  
Inspection

Name of the organization

UNITED STATES SQUASH RACQUETS ASSOC., INC.

Employer identification number

16-6050490

### 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 11, 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.)
- 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 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.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☐ 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 that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I    b ☐ Type II    c ☐ Type III-Functionally integrated    d ☐ Type III-Non-functionally integrated
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? ☐
- (ii) A family member of a person described in (i) above? ☐
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? ☐
- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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**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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") . . . . .						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>4</b> <b>Total.</b> Add lines 1 through 3 . . . . .						
<b>5</b> 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). . . . .						
<b>6</b> <b>Public support.</b> Subtract line 5 from line 4 . . . . .						

## Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>7</b> Amounts from line 4 . . . . .						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .						
<b>11</b> <b>Total support.</b> Add lines 7 through 10 . . . . .						
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	
<b>13</b> <b>First five years.</b> 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 <b>stop here</b> . . . . .						<input type="checkbox"/>

## Section C. Computation of Public Support Percentage

<b>14</b> Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	%
<b>15</b> Public support percentage from 2011 Schedule A, Part II, line 14 . . . . .	<b>15</b>	%
<b>16a</b> <b>33 1/3% support test - 2012.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b</b> <b>33 1/3% support test - 2011.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>17a</b> <b>10%-facts-and-circumstances test - 2012.</b> 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 <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b</b> <b>10%-facts-and-circumstances test - 2011.</b> 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 <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>18</b> <b>Private foundation.</b> 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"/>

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.  
If the organization fails to qualify under the tests listed below, please complete Part II.)

### Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	1,099,758.	1,068,486.	1,490,821.	2,713,141.	1,384,112.	7,756,318.
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1,042,693.	942,487.	1,105,062.	1,947,323.	1,843,051.	6,880,616.
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						0
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						0
<b>6</b> Total. Add lines 1 through 5	2,142,451.	2,010,973.	2,595,883.	4,660,464.	3,227,163.	14,636,934.
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						0
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	35,595.					35,595.
<b>c</b> Add lines 7a and 7b	35,595.					35,595.
<b>8</b> Public support (Subtract line 7c from line 6.)						14,601,339.

### Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>9</b> Amounts from line 6	2,142,451.	2,010,973.	2,595,883.	4,660,464.	3,227,163.	14,636,934.
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	51,691.	45,722.	53,554.	47,382.	54,052.	252,401.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
<b>c</b> Add lines 10a and 10b	51,691.	45,722.	53,554.	47,382.	54,052.	252,401.
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1.	2,963.		39,057.	45,977.	46,723.	134,720.
<b>13</b> Total support. (Add lines 9, 10c, 11, and 12.)	2,197,105.	2,056,695.	2,688,494.	4,753,823.	3,327,938.	15,024,055.
<b>14</b> First five 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

<b>15</b> Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	97.19 %
<b>16</b> Public support percentage from 2011 Schedule A, Part III, line 15	<b>16</b>	96.86 %

### Section D. Computation of Investment Income Percentage

<b>17</b> Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	1.68 %
<b>18</b> Investment income percentage from 2011 Schedule A, Part III, line 17	<b>18</b>	1.52 %

- 19a 33 1/3% support tests - 2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☒ **X**
- b 33 1/3% support tests - 2011.** 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. The organization qualifies as a publicly supported organization ☐
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

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**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

ATTACHMENT 1

## SCHEDULE A, PART III - OTHER INCOME

DESCRIPTION	2008	2009	2010	2011	2012	TOTAL
COMMISSIONS & LICENSING			29,161.	32,977.	30,510.	92,648.
OTHER REVENUE	2,963.		9,896.	13,000.	16,213.	42,072.
TOTALS	<u>2,963.</u>		<u>39,057.</u>	<u>45,977.</u>	<u>46,723.</u>	<u>134,720.</u>



# PUBLIC DISCLOSURE

## SCHEDULE D (Form 990)

Department of the Treasury  
Internal Revenue Service

## Supplemental Financial Statements

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

OMB No. 1545-0047

**2012**

**Open to Public Inspection**

Name of the organization

UNITED STATES SQUASH RACQUETS ASSOC., INC.

Employer identification number

16-6050490

### Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year . . . . .		
2 Aggregate contributions to (during year) . . . . .		
3 Aggregate grants from (during year) . . . . .		
4 Aggregate value at end of year . . . . .		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No	

### Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements . . . . .	2a
b Total acreage restricted by conservation easements . . . . .	2b
c Number of conservation easements on a certified historic structure included in (a) . . . . .	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register . . . . .	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . . ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . . . . . ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

### Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 . . . . . ▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 . . . . . ▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_

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**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 are a 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 programs  
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" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included 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? . . . . . ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. . . . . ☐ Yes ☐ No

**Part V Endowment Funds.** Complete if the organization answered "Yes" to 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 . . . . .	2,912,975.	2,873,060.	2,609,121.	2,796,011.	2,870,035.
b Contributions . . . . .	341,243.	1,316,192.	674,385.	81,773.	564,966.
c Net investment earnings, gains, and losses . . . . .					-106,164.
d Grants or scholarships . . . . .					
e Other expenditures for facilities and programs . . . . .	605,058.	1,276,277.	410,446.	268,663.	532,826.
f Administrative expenses . . . . .					
g End of year balance . . . . .	2,649,160.	2,912,975.	2,873,060.	2,609,121.	2,796,011.

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 ► 85.0000 %  
c Temporarily restricted endowment ► 15.0000 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations . . . . .  
(ii) related organizations . . . . .

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.** 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 . . . . .		110,011.	79,997.	30,014.
e Other . . . . .				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . . .				30,014.

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## Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

## Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) -----		
(2) -----		
(3) -----		
(4) -----		
(5) -----		
(6) -----		
(7) -----		
(8) -----		
(9) -----		
(10) -----		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

## Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) -----	
(2) -----	
(3) -----	
(4) -----	
(5) -----	
(6) -----	
(7) -----	
(8) -----	
(9) -----	
(10) -----	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) . . . . . ▶	

## Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CAPITAL LEASE	11,415.
(3) DUE FROM SDA	3,000.
(4) -----	
(5) -----	
(6) -----	
(7) -----	
(8) -----	
(9) -----	
(10) -----	
(11) -----	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	14,415.

2. FIN 48 (ASC 740) Footnote. 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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. ☐

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## Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	3,632,646.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains on investments	59,830.		
<b>b</b>	Donated services and use of facilities			
<b>c</b>	Recoveries of prior year grants			
<b>d</b>	Other (Describe in Part XIII.)			
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	59,830.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	3,572,816.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b			
<b>b</b>	Other (Describe in Part XIII.)			
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>	3,572,816.

## Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	4,025,339.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities			
<b>b</b>	Prior year adjustments			
<b>c</b>	Other losses			
<b>d</b>	Other (Describe in Part XIII.)			
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	4,025,339.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b			
<b>b</b>	Other (Describe in Part XIII.)			
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>	4,025,339.

## Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

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Schedule D (Form 990) 2012

# PUBLIC DISCLOSURE

Schedule D (Form 990) 2012

UNITED STATES SQUASH RACQUETS ASSOC., INC.

16-6050490

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## Part XIII Supplemental Information (continued)

### ORGANIZATION'S ENDOWMENT FUNDS

SCH D, PART V, LINE 4

PERMANENTLY RESTRICTED NET ASSETS ARE RESTRICTED ENDOWMENTS IN WHICH THE PRINCIPAL IS INVESTED IN PERPETUITY AND THE INCOME IS EXPENDABLE TO SUPPORT THE DESIGNATED PURPOSES. THE PURPOSES FOR WHICH THE ENDOWMENT INCOME MAY BE USED AND THE PRINCIPAL AMOUNT OF THE ENDOWMENT DESIGNATED ARE FOR OPERATIONS AND JUNIOR DEVELOPMENT. TEMPORARILY RESTRICTED NET ASSETS ARE FOR OPERATIONS, JUNIOR DEVELOPMENT, URBAN SQUASH, HALL OF FAME, AND HARDBALL.

### FIN 48 DISCLOSURE

SCH D, PART X, LINE 2

THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND FROM NEW YORK INCOME TAXES UNDER THE RESPECTIVE STATE CHARITABLE ORGANIZATION TAXING AUTHORITIES. THE ASSOCIATION HAD NO UNRECOGNIZED TAX BENEFITS AT JUNE 30, 2013. THE ASSOCIATION HAD NO OPEN YEARS SUBJECT TO EXAMINATION PRIOR TO JUNE 30, 2010. IN ADDITION, THE ASSOCIATION HAS NO INCOME TAX RELATED PENALTIES OR INTEREST.

Schedule D (Form 990) 2012

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# PUBLIC DISCLOSURE

## SCHEDULE F (Form 990)

## Statement of Activities Outside the United States

OMB No. 1545-0047

2012

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

► Complete if the organization answered "Yes" to Form 990,  
Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

Name of the organization

Employer identification number

UNITED STATES SQUASH RACQUETS ASSOC., INC.

16-6050490

**Part I** General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total, . . . . .					
b Total from continuation sheets to Part I . . . . .					
c Totals (add lines 3a and 3b)					

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

Schedule F (Form 990) 2012

PUBLIC DISCLOSURE

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE/ICELAND/GREENLAND	ADVOCACY	75,000.	CHECK			
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. 1.
- 3 Enter total number of other organizations or entities. 1.

# PUBLIC DISCLOSURE

UNITED STATES SQUASH RACQUETS ASSOC., INC.

16-6050490

Schedule F (Form 990) 2012

Page 3

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2012

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PUBLIC DISCLOSURE  
UNITED STATES SQUASH RACQUETS ASSOC., INC.

16-6050490

Schedule F (Form 990) 2012

Page 4

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926). . . . . ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A). . . . . ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471). . . . . ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621). . . . . ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865). . . . . ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713). . . . . ☐ Yes ☒ No

Schedule F (Form 990) 2012

# PUBLIC DISCLOSURE

UNITED STATES SQUASH RACQUETS ASSOC., INC.

16-6050490

Schedule F (Form 990) 2012

Page **5**

## **Part V** Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

PUBLIC DISCLOSURE

SCHEDULE I  
(Form 990)

Department of the Treasury  
Internal Revenue Service  
Name of the organization

UNITED STATES SQUASH RACQUETS ASSOC., INC.

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 Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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 non-cash assistance	(h) Purpose of grant or assistance
(1)	CITY SQUASH P.O. BOX 619 - FORDHAM STATION	42-1535583	501(C)(3)	48,020.				SCHOLARSHIP GRANT TO PROVIDE SQUASH INSTR.
(2)	STREET SQUASH 40 WEST 116TH STREET NEW YORK, NY 10026	13-4061809	501(C)(3)	15,804.				SCHOLARSHIP GRANT TO PROVIDE SQUASH INSTR.
(3)	THE T SQUASH CENTER, LLC 4917 VIRGINIA AVENUE CINCINNATI, OH 45227	99-9999999		5,000.				SCHOLARSHIP GRANT TO PROVIDE SQUASH INSTR.
(4)	SQUASH HAVEN 70 TOWER PARKWAYS NEW HAVEN, CT 06511	20-5500876	501(C)(3)	11,904.				SCHOLARSHIP GRANT TO PROVIDE SQUASH INSTR.
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3.
- 3 Enter total number of other organizations listed in the line 1 table 1.
- For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2012)

JSA

PUBLIC DISCLOSURE

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

1	(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
2						
3						
4						
5						
6						
7						

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

GRANT MONITORING

FORM 990, SCHEDULE I, PART I, LINE 2

THE U.S. SQUASH JUNIOR DEVELOPMENT ENDOWMENT FUND ("JUNIOR FUND"),

ESTABLISHED IN 1996 BY CAMILLE AND BILL BROADBENT TO PROMOTE JUNIOR

SQUASH DEVELOPMENT IN THE US, DISTRIBUTES THE MAJORITY OF THE INCOME FROM

THE FUND TO PROGRAMS OR ORGANIZATIONS PROVIDING SQUASH INSTRUCTION TO

JUNIOR PLAYERS IN AN ORGANIZED, STRUCTURED MANNER, WITH THE PRIMARY FOCUS

OF PROVIDING AFFORDABLE ACCESS TO SQUASH TO THOSE WHO WISH TO LEARN.

PORTIONS OF THE DISTRIBUTIONS ALSO SUPPORT THE U.S. JUNIOR TEAM TO ENSURE

THAT ANY PLAYER WHO QUALIFIES FOR THE TEAM IS ABLE TO COMPETE

PUBLIC DISCLOSURE

Part III Grants and Other Assistance to Individuals in the United States. 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						
2						
3						
4						
5						
6						
7						

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

INTERNATIONALLY, REGARDLESS OF HIS OR HER FINANCIAL MEANS. THE JUNIOR FUND IS MANAGED BY THE U.S. SQUASH INVESTMENT COMMITTEE. KEY ELEMENTS OF U.S. SQUASH'S STRATEGY INCLUDE DEVELOPING GRASSROOTS PROGRAMS BY SEEDING COMMUNITY PROGRAMS, FOSTERING COLLABORATION AMONG CLUBS AND HIGH SCHOOLS TO FORM NEW PROGRAMS ACROSS THE COUNTRY AND COORDINATING OUR EFFORTS WITH THE URBAN SQUASH AND EDUCATION MOVEMENT. U.S. SQUASH IS DOING MORE THAN EVER BEFORE IN THESE AREAS USING DISTRIBUTIONS FROM OUR JUNIOR FUND. PROGRAMS MAY APPLY FOR GRANTS ON AN ROLLING BASIS.

# PUBLIC DISCLOSURE

## SCHEDULE J (Form 990)

Department of the Treasury  
Internal Revenue Service

### Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2012

Open to Public  
Inspection

Name of the organization

UNITED STATES SQUASH RACQUETS ASSOC., INC.

Employer identification number

16-6050490

### 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 in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input 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 (e.g., 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 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the filing 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 checked="" type="checkbox"/> Written employment contract                     |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in 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) and 501(c)(4) organizations must complete lines 5-9.**

**5** For persons listed in 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" to line 5a or 5b, describe in Part III.

**6** For persons listed in 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" to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported in 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" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

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

Schedule J (Form 990) 2012

# PUBLIC DISCLOSURE

UNITED STATES SQUASH RACQUETS ASSOC., INC.

16-6050490

Schedule J (Form 990) 2012

Page 2

## 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 in 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 are not 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 compensation				(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation					
KEVIN KLIPSTEIN 1 CEO	(i) 160,000.	20,000.				12,186.	192,186.	
	(ii)							
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)							

Schedule J (Form 990) 2012

# PUBLIC DISCLOSURE

UNITED STATES SQUASH RACQUETS ASSOC., INC.

16-6030490

Schedule J (Form 990) 2012

Page 3

## Part III Supplemental Information

Complete this part to 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.

FORM 990, SCHEDULE J

PART I, LINES 5A, 6A & 7

IN CONJUNCTION WITH THE FISCAL YEAR-END ANNUAL PERFORMANCE REVIEW THE

BOARD (WORKING TOGETHER WITH THE COMPENSATION COMMITTEE AS THE CASE MAY

BE) SHALL CONSIDER PAYING THE CEO A DISCRETIONARY PERFORMANCE BONUS BASED

UPON U.S. SQUASH ACHIEVING KEY TACTICAL INDICATORS AS SET FORTH IN THE

ANNUAL OPERATING PLAN. A BONUS WILL BE AWARDED BASED ON A POSITIVE ANNUAL

PERFORMANCE REVIEW BY THE BOARD OF DIRECTORS (IN THE RANGE OF \$10,000 TO

\$20,000); ACHIEVEMENT OF KEY TACTICAL INDICATORS (IN THE RANGE OF \$10,000

TO \$20,000); AND IN THE EVENT AN OPERATING SURPLUS IS ACHIEVED (IN THE

RANGE OF \$10,000 TO \$20,000).

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Schedule J (Form 990) 2012

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# PUBLIC DISCLOSURE

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

Department of the Treasury  
Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2012

Open to Public  
Inspection

Name of the organization

UNITED STATES SQUASH RACQUETS ASSOC., INC.

Employer identification number

16-6050490

### REVIEW OF FORM 990

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

FORM 990 - IT IS REVIEWED BY THE FINANCE AND AUDIT COMMITTEE ALONG WITH  
CEO AND CFO BEFORE SUBMISSION TO THE BOARD. ONCE APPROVED BY THE ENTIRE  
BOARD, THE 990 IS FILED.

### DOCUMENTATION

FORM 990, PART VI, SECTION C, LINE 19

US SQUASH ASSOCIATION MAKES ALL DOCUMENTS AVAILABLE TO THE PUBLIC THAT  
ARE REQUIRED BY LAW.

### CEO COMPENSATION POLICY

FORM 990, PART VI, SECTION B, LINE 15 A & B

THE BOARD FORMED A COMPENSATION COMMITTEE COMPRISED OF THE BOARD CHAIR,  
THE CHAIR OF THE FINANCE COMMITTEE, AND TWO OTHER BOARD MEMBERS TO REVIEW  
THE COMPENSATION OF THE CEO ANNUALLY. THE COMPENSATION COMMITTEE  
CONSIDERS ANNUAL SURVEYS OF COMPENSATION LEVELS OF COMPARABLE EXECUTIVES  
TO ENSURE THE U.S. SQUASH CEO'S COMPENSATION IS CONSISTENT WITH THE  
MARKET. THE BOARD CONDUCTS FORMAL WRITTEN PERFORMANCE REVIEWS OF THE CEO  
AT A MINIMUM ANNUALLY. EACH BOARD MEMBER IS ASKED TO PROVIDE A WRITTEN  
EVALUATION BASED UPON PRE-AGREED CRITERIA IN ORDER TO DETERMINE THESE  
REVIEWS. EACH REVIEW ALSO INCLUDES A REVIEW OF THE EXECUTIVE'S  
COMPENSATION WHICH CONSIDERS THE PARAMETERS SET FORTH ABOVE. IN  
ADDITION, THE BOARD CHAIR PERIODICALLY REVIEWS THE CEO'S TRAVEL AND

# PUBLIC DISCLOSURE

Schedule O (Form 990 or 990-EZ) 2012

Page 2

Name of the organization

Employer identification number

UNITED STATES SQUASH RACQUETS ASSOC., INC.

16-6050490

ENTERTAINMENT REIMBURSEMENT PRACTICES AND AMOUNTS TO INSURE THEY ARE IN ACCORDANCE WITH CUSTOMARY AND REASONABLE BEST PRACTICES. THE FINANCE, AUDIT AND COMPENSATION COMMITTEE HAS THE RESPONSIBILITY TO DETERMINE WHETHER OR NOT IT WILL RECOMMEND TO THE ENTIRE BOARD, FOR ITS REVIEW AND CONSIDERATION, AN ANNUAL DISCRETIONARY COMPENSATION BONUS BASED ON THE RESULTS OF THE PERFORMANCE REVIEW. THE COMPENSATION SUB-COMMITTEE SHALL CONSIST OF THE BOARD CHAIR, THE CHAIR OF THE FINANCE, AUDIT AND COMPENSATION COMMITTEE AND TWO OTHER BOARD MEMBERS. IN CONSIDERING WHETHER OR NOT A BONUS IS WARRANTED, THE FINANCE, AUDIT AND COMPENSATION COMMITTEE AND BOARD AS A WHOLE WILL CONSIDER WHETHER THE ASSOCIATION HAS MET THE FINANCIAL EXPECTATIONS SET FORTH IN THE ANNUAL BUDGET AND OTHER PRE-AGREED UPON PERFORMANCE CRITERIA SUCH AS MEMBERSHIP GROWTH, EFFECTIVE PROGRAM IMPLEMENTATION, IMPROVEMENT, AND OVERSIGHT, KNOWN AS KEY TACTICAL INDICATORS. THE ANTICIPATED RANGE OF THE CEO'S DISCRETIONARY BONUS IS TO BE BETWEEN 5% AND 25% OF BASE COMPENSATION IN YEARS WITH OVERALL SATISFACTORY JOB PERFORMANCE AND BETTER.

## CONFLICT OF INTEREST

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

THOSE WHO SERVE U.S. SQUASH, WHETHER AS VOLUNTEERS OR PAID PROFESSIONALS, ARE REQUIRED TO READILY DISCLOSE ANY CONFLICTING INTERESTS WHENEVER THEY ARISE, AS WELL AS PHYSICAL ABSENCE FROM AND STRICT NONPARTICIPATION IN ANY EVALUATION OR DECISION MAKING PROCESS RELATING TO MATTERS IN WHICH THE INDIVIDUAL HAS A REAL OR APPARENT CONFLICT OF INTEREST.

AS PART OF THE BOARD OF REVIEW'S COMMITTEE CHARTER, ITS AUTHORITY AND PROCEDURES INCLUDE INVESTIGATION INTO ANY MATTERS INVOLVING A CONFLICT OF

# PUBLIC DISCLOSURE

Schedule O (Form 990 or 990-EZ) 2012

Page **2**

Name of the organization

UNITED STATES SQUASH RACQUETS ASSOC., INC.

Employer identification number

16-6050490

INTEREST, ELECTION IMPROPRIETY, VIOLATION OF THE CODE OF CONDUCT OR ETHICS, PRINCIPLES & CONFLICT OF INTEREST POLICY, OR ANY PERTINENT MATTER SUBMITTED FOR REVIEW AND RECOMMEND ACTION FOR REVIEW AND FINAL APPROVAL BY THE BOARD OF DIRECTORS.

IN SUMMARY, BOARD MEMBERS, OFFICERS AND KEY STAFF MEMBERS ARE REQUIRED TO DISCLOSE EVEN THE APPEARANCE OF A CONFLICT OF INTEREST, AND THE BOARD OF REVIEW IS TASKED WITH INVESTIGATIONS AND REVIEWS, IN ADDITION TO PROVIDING CLEARANCES IF APPLICABLE WHEN POTENTIAL CONFLICTS ARE BROUGHT TO THE COMMITTEE.

OTHER RECONCILING ITMES

FORM 990, PART XI, LINE 5

THERE ARE UNREALIZED GAINS IN THE AMOUNT OF \$59,830.

MEMBERS

FORM 990, PART VI, LINE 6

ANY INDIVIDUAL PERSON MAY BECOME AN ANNUAL MEMBER, A LIFE MEMBER, AN HONORARY LIFE MEMBER OR A MEMBER OF SUCH OTHER CLASS OF INDIVIDUAL MEMBERSHIP AS MAY FROM TIME TO TIME BE ESTABLISHED BY THE BOARD (HEREINAFTER REFERRED TO AS "MEMBERS"). INDIVIDUAL PERSONS MAY BECOME HONORARY LIFE MEMBERS UPON ELECTION BY THE BOARD. ANY PERSON, INCLUDING, BUT NOT LIMITED TO, ANY PERSON WHO IS AN ATHLETE, COACH, TRAINER, MANAGER, ADMINISTRATOR, OR OFFICIAL ACTIVE IN THE SPORT OF SQUASH, MAY BECOME AN ANNUAL MEMBER, LIFE MEMBER OR HONORARY LIFE MEMBER OF THIS ASSOCIATION AS HEREIN PROVIDED.

# PUBLIC DISCLOSURE

Schedule O (Form 990 or 990-EZ) 2012

Page **2**

Name of the organization

Employer identification number

UNITED STATES SQUASH RACQUETS ASSOC., INC.

16-6050490

MEMBERSHIP RIGHTS ARE LIMITED TO THE FOLLOWING. ANNUAL MEMBERS, LIFE MEMBERS AND HONORARY LIFE MEMBERS SHALL BE ENTITLED TO VOTE AT THE ANNUAL MEETING AND SPECIAL MEETINGS OF THE MEMBERS OF THIS ASSOCIATION AND TO PLAY, IF OTHERWISE QUALIFIED, IN ALL TOURNAMENTS AND MATCHES PLAYED UNDER THE AUSPICES OF, OR SANCTIONED BY, THIS ASSOCIATION UPON PAYMENT OF SUCH FEES OR DUES AS MAY BE PRESCRIBED FOR ANY SUCH CLASS OF MEMBERSHIP.

## VOTING

FORM 990, PART VI, LINE 7A

THE MEMBERS OF THE ORGANIZATION HAVE THE RIGHT TO VOTE IN AND OUT OTHER MEMBERS.

ATTACHMENT 1

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

## ORGANIZED PLAY, SANCTIONING AND RANKINGS

U.S. SQUASH IS RESPONSIBLE FOR OFFICIALLY SANCTIONING TOURNAMENTS AND LEAGUES NATIONALLY, SETTING THE BASIC STANDARDS AND GUIDELINES FOR COMPETITION, AND OF COURSE, DELIVERING THE OFFICIAL RANKING SYSTEM. THE ASSOCIATION SANCTIONS HUNDREDS OF TOURNAMENTS EACH YEAR, AND CITY LEAGUES IN OVER A DOZEN MAJOR MARKETS, WORKING WITH OVER 200 TOURNAMENT ORGANIZERS AND LEAGUE COORDINATORS OF ALL LEVELS OF SOPHISTICATION.

## GRASSROOTS DEVELOPMENT

U.S. SQUASH IS RESPONSIBLE FOR GRASSROOTS DEVELOPMENT OF THE SPORT. AS SUCH THE ASSOCIATION SUPPORTS PROGRAMS TO PROMOTE SQUASH AT ALL LEVELS, FROM URBAN TO COMMUNITY PROGRAMS.

U.S. SQUASH WORKS IN CLOSE PARTNERSHIP TO SUPPORT THE NATIONAL

# PUBLIC DISCLOSURE

Schedule O (Form 990 or 990-EZ) 2012

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Name of the organization

Employer identification number

UNITED STATES SQUASH RACQUETS ASSOC., INC.

16-6050490

ATTACHMENT 1 (CONT'D)

URBAN SQUASH & EDUCATION ASSOCIATION, PROVIDING OVER \$50,000  
ANNUALLY IN CASH AND IN-KIND SUPPORT FOR URBAN SQUASH NATIONALLY.  
NATIONAL CHAMPIONSHIPS AND EVENTS  
U.S. SQUASH MANAGES AND RUNS DOZENS OF EVENTS, PRIMARILY FOCUSED  
ON THE 20+ NATIONAL CHAMPIONSHIPS EACH YEAR ACROSS JUNIORS AND  
ADULTS, SINGLES AND DOUBLES WITH OVER 5,000 PARTICIPANTS.  
THE ASSOCIATION ALSO OWNS AND LICENSES THE U.S. OPEN AND NORTH  
AMERICAN OPEN PROFESSIONAL TITLES - TWO EVENTS WHICH ARE EXPECTED  
TO RECEIVE MORE FOCUS IN THE FUTURE.  
NATIONAL TEAMS AND ELITE DEVELOPMENT  
U.S. SQUASH OPERATES THE NATIONAL TEAMS AND ELITE DEVELOPMENT  
PROGRAMS. THE ORGANIZATION WORKS CLOSELY WITH THE U.S. OLYMPIC  
COMMITTEE, AS A MEMBER ORGANIZATION, TO DEVELOP AND IMPLEMENT THE  
ELITE ATHLETE PROGRAMS. THESE PROGRAMS INCLUDE SELECTING AND  
SUPPORTING FIVE NATIONAL TEAMS: THE JUNIOR MEN'S AND JUNIOR  
WOMEN'S TEAMS, THE MEN'S AND WOMEN'S TEAMS AND THE UNDER 23 SQUAD  
IN PARTNERSHIP WITH THE COLLEGE SQUASH ASSOCIATION.  
THESE TEAMS REPRESENT THE UNITED STATES IN INTERNATIONAL  
COMPETITION INCLUDING THE BI-ANNUAL WORLD TEAM CHAMPIONSHIPS,  
WORLD UNIVERSITY GAMES AND THE QUADRENNIAL PAN AMERICAN GAMES  
WHICH IS JUST ONE LEVEL BELOW THE OLYMPICS. OTHER ACTIVITY  
INCLUDES JUNIOR ELITE TRAINING SQUADS AND EVENTS SUCH AS THE  
POPULAR CAN-AM CHALLENGE FOR THE JUNIORS HELD EACH YEAR.  
THESE PROGRAMS INVOLVE WORKING WITH 8-10 NATIONAL COACHES.  
GOVERNANCE AND STANDARDS

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ATTACHMENT 1 (CONT'D)

THE ASSOCIATION IS RESPONSIBLE FOR THE OVERALL GOVERNANCE AND STANDARDS OF THE SPORT, AND REPRESENTS THE UNITED STATES AS A MEMBER OF THE WORLD SQUASH FEDERATION. U.S. SQUASH ESTABLISHES AND UPHOLDS THE CODE OF CONDUCT.

MARKETING AND PROMOTION

U.S. SQUASH IS ALSO RESPONSIBLE FOR MARKETING AND PROMOTING THE SPORT, AND THEREFORE MAINTAINS THE WEBSITE WWW.USSQUASH.COM AND PARTNERS TO PUBLISH AN OFFICIAL PUBLICATION, SQUASH MAGAZINE, TEN TIMES PER YEAR.

ATTACHMENT 2

FORM 990, PART VIII - INVESTMENT INCOME

DESCRIPTION	(A)	(B)	(C)	(D)
	TOTAL REVENUE	RELATED OR EXEMPT REVENUE	UNRELATED BUSINESS REV.	EXCLUDED REVENUE
INTEREST AND DIVIDEND INCOME	54,052.			54,052.
TOTALS	<u>54,052.</u>			<u>54,052.</u>

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Page **2**

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## ATTACHMENT 3

### FORM 990, PART VIII - GROSS SALES AND COST OF GOODS SOLD

GROSS SALES LESS RETURNS AND ALLOWANCES .....	47,860.
INVENTORY AT BEGINNING OF YEAR .....	38,816.
PURCHASES .....	64,613.
SALARIES AND WAGES .....	
OTHER COSTS .....	
SUBTOTAL .....	103,429.
MINUS ENDING INVENTORY .....	42,496.
COST OF GOODS SOLD .....	60,933.

## ATTACHMENT 4

### FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

DESCRIPTION	ENDING BOOK VALUE
PREPAID EXPENSES	133,516.
TOTALS	133,516.

## ATTACHMENT 5

### FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION	ENDING BOOK VALUE	COST OR FMV
EXCHANGE TRADED FUNDS	2,273,644.	FMV
CASH AND MONEY MARKET FUNDS	46,344.	FMV
TOTALS	2,319,988.	

# PUBLIC DISCLOSURE

Form <b>CHAR500</b>  <small>This form used for Article 7-A, EPTL and dual filers (replaces forms CHAR 497, CHAR 010 and CHAR 006)</small>	<b>Annual Filing for Charitable Organizations</b> New York State Department of Law (Office of the Attorney General) Charities Bureau - Registration Section 120 Broadway New York, NY 10271 <a href="http://www.charitiesnys.com">http://www.charitiesnys.com</a>	<b>2 0 1 2</b>  <b>Open to Public Inspection</b>
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## 1. General Information

a. For the fiscal year beginning (mm/dd/yyyy) <u>07/01/2012</u> and ending (mm/dd/yyyy) <u>06/30/2013</u>											
b. Check if applicable for NYS <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial filing <input type="checkbox"/> Final filing <input type="checkbox"/> Amended filing <input type="checkbox"/> NY registration pending	c. Name of organization <b>UNITED STATES SQUASH RACQUETS ASSOC., INC.</b>  <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Number and street (or P O box if mail not delivered to street address)</td> <td style="width: 40%;">Room/suite</td> </tr> <tr> <td>555 EIGHTH AVENUE</td> <td>1102</td> </tr> <tr> <td colspan="2">City or town, state or country and zip + 4</td> </tr> <tr> <td colspan="2">NEW YORK, NY, 10018-4311</td> </tr> </table>		Number and street (or P O box if mail not delivered to street address)	Room/suite	555 EIGHTH AVENUE	1102	City or town, state or country and zip + 4		NEW YORK, NY, 10018-4311		d. Fed employer ID no (EIN) (##-####) 16 6050490  e. NY State registration no (##-##-##) 03-33 14  f. Telephone number (212) 268 4090  g. Email
Number and street (or P O box if mail not delivered to street address)	Room/suite										
555 EIGHTH AVENUE	1102										
City or town, state or country and zip + 4											
NEW YORK, NY, 10018-4311											

## 2. Certification - Two Signatures Required

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

a. President or Authorized Officer	Signature	Printed Name	Title	Date
b. Chief Financial Officer or Treas.	Signature	Printed Name	Title	Date

## 3. Annual Report Exemption Information

a. Article 7-A annual report exemption (Article 7-A registrants and dual registrants)  
 Check ☐ if total contributions from NY State (including residents, foundations, corporations, government agencies, etc.) did not exceed \$25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during this fiscal year.

**NOTE:** An organization may claim this exemption if no PFR or FRC was used and either: 1) it received an allocation from a federated fund, United Way or incorporated community appeal and contributions from other sources did not exceed \$25,000 or 2) it received all or substantially all of its contributions from one government agency to which it submitted an annual report similar to that required by Article 7-A.

b. EPTL annual report exemption (EPTL registrants and dual registrants)  
 Check ☐ if gross receipts did not exceed \$25,000 and assets (market value) did not exceed \$25,000 at any time during this fiscal year.

For EPTL or Article 7-A registrants claiming the annual report exemption under the one law under which they are registered and for dual registrants claiming the annual report exemptions under both laws, simply complete part 1 (General Information), part 2 (Certification) and part 3 (Annual Report Exemption Information) above.

*Do not submit a fee, do not complete the following schedules and do not submit any attachments to this form.*

## 4. Article 7-A Schedules

If you did not check the Article 7-A annual report exemption above, complete the following for this fiscal year:

a. Did the organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State? . . . ☐ Yes\* ☒ No  
 \* If "Yes", complete Schedule 4a.

b. Did the organization receive government contributions (grants)? . . . . . ☐ Yes\* ☒ No  
 \* If "Yes", complete Schedule 4b.

## 5. Fee Submitted: See last page for summary of fee requirements.

Indicate the filing fee(s) you are submitting along with this form:	
a. Article 7-A filing fee . . . . .	\$ <u>25.</u>
b. EPTL filing fee . . . . .	\$ <u>250.</u>
c. Total fee . . . . .	\$ <u>275.</u>

**Submit only one check or money order for the total fee, payable to "NYS Department of Law"**

## 6. Attachments - For organizations that are not claiming annual report exemptions under both laws, see last page for required attachments → → →



# PUBLIC DISCLOSURE

## 5. Fee Instructions

The filing fee depends on the organization's Registration Type. For details on Registration Type and filing fees, see the Instructions for Form CHAR500.

Organization's Registration Type	Fee Instructions
----------------------------------	------------------

- |               |  |
|---------------|--|
| • Article 7-A | Calculate the Article 7-A filing fee using the table in <b>part a</b> below. The EPTL filing fee is \$0.   |
| • EPTL        | Calculate the EPTL filing fee using the table in <b>part b</b> below. The Article 7-A filing fee is \$0.   |
| • Dual        | Calculate both the Article 7-A and EPTL filing fees using the tables in <b>parts a and b</b> below. Add the Article 7-A and EPTL filing fees together to calculate the total fee. Submit a <u>single</u> check or money order for the total fee. |

a) Article 7-A filing fee

Total Support & Revenue	Article 7-A Fee
more than \$250,000	\$25
up to \$250,000 *	\$10

\* Any organization that contracted with or used the services of a professional fund raiser (PFR) or fund raising counsel (FRC) during the reporting period must pay an Article 7-A filing fee of \$25, regardless of total support and revenue.

b) EPTL filing fee

Net Worth at End of Year	EPTL Fee
Less than \$50,000	\$25
\$50,000 or more, but less than \$250,000	\$50
\$250,000 or more, but less than \$1,000,000	\$100
\$1,000,000 or more, but less than \$10,000,000	\$250
\$10,000,000 or more, but less than \$50,000,000	\$750
\$50,000,000 or more	\$1500

## 6. Attachments - Document Attachment Check-List

Check the boxes for the documents you are attaching.

**For All Filers**

Filing Fee

☒ Single check or money order payable to "NYS Department of Law"

Copies of Internal Revenue Service Forms

<input checked="" type="checkbox"/> IRS Form 990	<input type="checkbox"/> IRS Form 990-EZ	<input type="checkbox"/> IRS Form 990-PF
<input checked="" type="checkbox"/> All required schedules (including Schedule B)	<input type="checkbox"/> All required schedules (including Schedule B)	<input type="checkbox"/> All required schedules (including Schedule B)
<input type="checkbox"/> IRS Form 990-T	<input type="checkbox"/> IRS Form 990-T	<input type="checkbox"/> IRS Form 990-T

**Additional Article 7-A Document Attachment Requirement**

Independent Accountant's Report

☒ Audit Report (total support & revenue more than \$250,000)  
☐ Review Report (total support & revenue \$100,001 to \$250,000)  
☐ No Accountant's Report Required (total support & revenue not more than \$100,000)