

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047
2022
Open to Public Inspection

A For the **2022** calendar year, or tax year beginning **01-01-2022**, and ending **12-31-2022**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: ATP Tour Inc
 Doing business as:
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: 201 ATP Tour Blvd
 City or town, state or province, country, and ZIP or foreign postal code: Ponte Vedra Beach, FL 32082

D Employer identification number: 95-2833251
E Telephone number: (904) 285-8000
G Gross receipts \$ 259,495,731

F Name and address of principal officer:
 MASSIMO CALVELLI
 201 ATP Tour Blvd
 Ponte Vedra Beach, FL 32082

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. See instructions.
H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c)(6) ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ www.ATPTour.com

K Form of organization: Corporation Trust Association Other ▶
L Year of formation: 1973 **M** State of legal domicile: DE

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: ATP activities for the year include providing services and benefits for its members, promoting and growing the sport of tennis and administrating a circuit of professional tennis events.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	7	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	6	
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	76	
	6 Total number of volunteers (estimate if necessary)	0	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	499,805	
7b Net unrelated business taxable income from Form 990-T, Part I, line 11	0		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	175,573,224	258,867,646
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	962,902	452,178
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	255,215	175,907
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	176,791,341	259,495,731
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	230,058
14 Benefits paid to or for members (Part IX, column (A), line 4)		2,094,955	2,489,953
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		17,164,985	18,236,329
16a Professional fundraising fees (Part IX, column (A), line 11e)			0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0			
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		132,247,500	149,610,953
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	151,737,498	171,177,443	
19 Revenue less expenses. Subtract line 18 from line 12	25,053,843	88,318,288	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	290,281,328	396,963,830
	22 Net assets or fund balances. Subtract line 21 from line 20	39,691,187	63,988,066
		250,590,141	332,975,764

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: 2024-02-08
 Zehra Mesic CFO
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: Preparer's signature: Date:
 Firm's name ▶ CROWE LLP Firm's EIN ▶ 35-0921680
 Firm's address ▶ 401 East Las Olas Blvd Suite 1100 Fort Lauderdale, FL 333014230 Phone no. (954) 202-8600
 Check if self-employed PTIN P01320603

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

TO SERVE MEN'S PROFESSIONAL TENNIS WORLDWIDE BY SHOWCASING THE GREATEST PLAYERS AT THE BEST TOURNAMENTS, TO ENTERTAIN MILLIONS OF FANS AROUND THE GLOBE, AND INSPIRE THE NEXT GENERATION OF FANS AND PLAYERS.

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 \$ including grants of \$) (Revenue \$)
See Additional Data

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
See Additional Data

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

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

4e Total program service expenses **0**

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, and Yes/No response. Rows include questions 1 through 21 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question/Description, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, tax-exempt bonds, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question/Description, Yes, No. Rows include 1a (Form 1096), 1b (Forms W-2G), and 1c (gambling winnings).

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

Table with 4 columns: Question/Section, Answer field, Yes/No field, and a final empty field. Rows include questions 2a through 17 regarding employee reporting, federal employment tax returns, business income, foreign accounts, prohibited transactions, charitable contributions, and various organizational requirements.

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



Section A. Governing Body and Management

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

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records:

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Andrea Gaudenzi CHAIRMAN (NRA)	0.0 50.0	X		X				0	1,422,324	85,046
(2) Charles Smith Director	15.0 0.0	X						107,724	0	0
(3) Eno Polo Director	10.0 0.0	X						120,000	0	0
(4) Gavin Forbes Director	20.0 0.0	X						100,000	0	0
(5) Herwig Straka Director	15.0 0.0	X						120,000	0	0
(6) Mark Knowles Director	10.0 0.0	X						100,000	0	0
(7) Nicolas Basing DIRECTOR	15.0 0.0	X						100,000	0	0
(8) Alison Lee EVP International Group	50.0 0.0			X				243,812	0	27,369
(9) Brett Byron Sr Legal Counsel	50.0 0.0			X				184,554	0	31,844
(10) Jeff Reel SVP and General Counsel	50.0 0.0			X				265,938	0	43,297
(11) Mark Young Chief Legal and Administrative Officer	50.0 0.0			X				858,644	0	57,959
(12) Massimo Calvelli CEO (NRA)	50.0 0.0			X				1,029,322	0	35,500
(13) Philip Galloway Advisor to CEO	50.0 0.0			X				178,347	0	64,378
(14) Simon Higson EVP, Communications	0.0 50.0			X				0	256,902	53,486
(15) Zehra Mesic CFO	50.0 0.0			X				335,608	0	45,602
(16) Daniele Sano Chief Business Officer	50.0 0				X			322,797	0	0
(17) Rodolphe Tastet VP, Sales and Sponsorships	0.0 50.0				X			0	157,288	32,803

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) Ross Hutchins Chief Tour Officer	50.0			X			494,245	0	21,889	
(19) Eric Starelli EVP Americas	50.0					X	252,541	0	21,178	
(20) Geoffroy Bourbon EVP, EUROPE	0.0					X	0	240,374	50,870	
(21) Irene Wolfe EVP, Human Resources	50.0					X	185,124	0	19,142	
(22) Miro Bratoev SVP, Rules and Competition	50.0					X	198,497	0	40,165	
(23) Murray Swartzberg SVP, IT and Systems	50.0					X	357,191	0	41,944	
1b Sub-Total										
1c Total from continuation sheets to Part VII, Section A										
1d Total (add lines 1b and 1c)							5,554,344	2,076,888	672,472	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶ 50**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATP Media Licensing Ltd 4TH FLOOR 22-24 WORPLE RD WIMBELEDON SE194DD UK	TV/Production Services	7,879,575
Trans World International LLC (IMG) 200 5TH AVE 7th Floor NY, NY 100103312	Consultant media rights	5,181,320
PROSKAUER ROSE LLP Eleven Times Square New York, NY 100368299	LEGAL SERVICES	1,893,990
SIFT INC 1120 INVERNESS PLACE SAN LUIS OBISPO, CA 100103312	TV/Video Production	1,632,672
MATTA GLOBAL LTD 128 SOUTHWARK ST LONDON SE10SW UK	TV/VIDEO PRODUCTION	1,186,785

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **▶ 46**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a - 1f:\$	1g					
	h Total. Add lines 1a-1f			0			
Program Service Revenue		Business Code					
	2a Member Services and Benefits	711300	189,778,988	189,304,504	474,484		
	b PROFESSIONAL TOURNAMENT REV	711300	52,158,121	52,158,121			
	c Membership Dues and Fees	711300	8,925,485	8,925,485			
	d Player Benefit Plans	711300	1,574,129	1,574,129			
	e Challenger Circuit Fees	711300	1,788,240	1,788,240			
	f All other program service revenue		4,642,683	4,617,362	25,321	0	
9 Total. Add lines 2a-2f.		258,867,646					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		452,178			452,178	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		75,003			75,003	
	6a Gross rents	(i) Real					
		(ii) Personal					
		b Less: rental expenses	6b				
		c Rental income or (loss)	6c	0	0		
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
		b Less: cost or other basis and sales expenses	7b				
		c Gain or (loss)	7c	0	0		
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		8a				
		b Less: direct expenses	8b				
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19		9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances		10a					
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11a Recovered Investments	900099	49,098	49,098				
b ATP Media Comp	900099	42,282	42,282				
c Travel reward program	900099	8,279	8,279				
d All other revenue		1,245	1,245	0	0		
e Total. Add lines 11a-11d		100,904					
12 Total revenue. See instructions		259,495,731	258,468,745	499,805	527,181		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	476,953			
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	363,255			
4 Benefits paid to or for members	2,489,953			
5 Compensation of current officers, directors, trustees, and key employees	6,899,877			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	9,100,981			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	448,650			
9 Other employee benefits	1,280,922			
10 Payroll taxes	505,899			
11 Fees for services (non-employees):				
a Management				
b Legal	2,901,404			
c Accounting	245,050			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	41,175			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	7,083,666			
12 Advertising and promotion	8,602,406			
13 Office expenses	1,017,459			
14 Information technology	1,444,875			
15 Royalties				
16 Occupancy	399,887			
17 Travel	5,138,888			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	717,899			
20 Interest				
21 Payments to affiliates	4,613,108			
22 Depreciation, depletion, and amortization	70,162			
23 Insurance	1,069,629			
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 Tournament Member Payments	80,709,245			
b Television Production Costs	12,274,291			
c Player Member Payments	9,826,996			
d Challenger Payments	7,309,058			
e All other expenses	6,145,755			
25 Total functional expenses. Add lines 1 through 24e	171,177,443			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash—non-interest-bearing		1		
	2 Savings and temporary cash investments	4,302,973	2	11,328,821	
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net	39,765,284	4	55,303,179	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	0	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0	
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	1,016,696	9	1,336,958	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	4,039,383			
	b Less: accumulated depreciation	3,253,675	627,387	10c	785,708
	11 Investments—publicly traded securities	31,786,092	11	90,486,058	
	12 Investments—other securities. See Part IV, line 11	4,015,546	12	9,014,825	
	13 Investments—program-related. See Part IV, line 11	207,905,193	13	227,835,992	
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	862,157	15	872,289	
16 Total assets. Add lines 1 through 15 (must equal line 33)	290,281,328	16	396,963,830		
Liabilities	17 Accounts payable and accrued expenses	29,844,888	17	46,445,320	
	18 Grants payable	166,937	18		
	19 Deferred revenue	986,977	19	9,231,482	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	0	
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	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	8,692,385	25	8,311,264	
	26 Total liabilities. Add lines 17 through 25	39,691,187	26	63,988,066	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27 Net assets without donor restrictions	250,590,141	27	332,975,764	
	28 Net assets with donor restrictions		28		
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29 Capital stock or trust principal, or current funds		29		
	30 Paid-in or capital surplus, or land, building or equipment fund		30		
	31 Retained earnings, endowment, accumulated income, or other funds		31		
32 Total net assets or fund balances	250,590,141	32	332,975,764		
33 Total liabilities and net assets/fund balances	290,281,328	33	396,963,830		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	259,495,731
2	Total expenses (must equal Part IX, column (A), line 25)	2	171,177,443
3	Revenue less expenses. Subtract line 2 from line 1	3	88,318,288
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	250,590,141
5	Net unrealized gains (losses) on investments	5	-10,934,848
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	5,002,183
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	332,975,764

Part XII Financial Statements and Reporting

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

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

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

Additional Data

Software ID: 22016089
Software Version: 2022v5.0
EIN: 95-2833251
Name: ATP Tour Inc

Form 990 (2022)

Form 990, Part III, Line 4a:

ATP continued to deliver value to its members through sponsorships, broadcast, prize money, and pension benefits across the 2022 ATP Tour season. Total ATP Tour player compensation totaled US\$ 180.4 million in 2022, made up of On-Site Prize Money (ATP Tour and Challenger Tour) and Bonus Pool. ATP increased pension contributions to record levels, delivering US\$ 167,900 contributions per player, for a total contribution of US\$ 28 million. In addition, the ATP Challenger Tour delivered a record high US\$ 12 million in prize money. In June, ATP announced Phase One approval of 'OneVision', a long-term transformational Strategic Plan designed to take tennis to new heights.

Form 990, Part III, Line 4b:

The ATP's marketing and promotional efforts continued to elevate the profile of professional tennis in 2022. Over 827 million viewers tuned in on television and online throughout the season. The ATP's total social media following grew to 10.5 million across official accounts. Other initiatives include the release of ATP/WTA Live - a joint mobile app for fans in collaboration with the Hologic WTA Tour, the launch of campaign 'Game Changing' celebrating the 50th anniversary of the ATP's formation, and the launch of LOVE, the ATP's first-ever NFT collection.

Form 990, Part III, Line 4c:

The ATP successfully governed the men's professional tennis circuits - the ATP Tour; the ATP Challenger Tour; and the ATP Champions Tour. In January 2022, ATP delivered the third edition of the ATP Cup, in partnership with Tennis Australia, with \$10 million in prize money. In November, the season-ending Nitto ATP Finals was held for the second time in Turin, Italy. The event delivered US\$ 14.75 million in prize money, 38.8 million video views, and a global reach of 172 million across social, digital and PR. In total, the 2022 season featured 63 ATP Tour events, welcoming 4.15 million fans onsite. This included several new tournaments, issued as single-year event licenses in order to provide additional playing opportunities. A total of 5 regular ATP Tour events were cancelled due to the pandemic, including all events in China, with one further event suspended following Russia's invasion of Ukraine.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2022
Open to Public Inspection

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization
ATP Tour Inc

Employer identification number
95-2833251

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes 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? Yes No

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

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

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

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 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 July 25, 2006, 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, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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" on Form 990, Part IV, line 8.

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

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

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

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

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

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

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

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" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
1f	

- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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 ▶
- c** Term endowment ▶

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

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

- (i)** Unrelated organizations
- (ii)** Related organizations

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

b If "Yes" on 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.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		443,945		443,945
b Buildings		2,084,840	1,792,691	292,149
c Leasehold improvements		259,840	256,064	3,776
d Equipment		1,250,758	1,204,920	45,838
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				785,708

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Pension investment-equities	33,608,470	F
(2) Pension investment-fixed income	12,272,013	F
(3) Pension investment-short-term	28,227,065	F
(4) Pension Investment in partnership	1,407,993	F
(5) Pension loans receivable	152,320,451	F
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)	227,835,992	

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
Player Deferred Comp Plan	5,760,958
Executive Deferred Comp Plan	1,416,046
Due to ATP Tennis LTD	79,676
Equity in Earnings-ATP Tour Sam Sub	93,631
Due to ATP Tour Sam	
Deposit Tournaments	960,953
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	8,311,264

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

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

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

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

Part XIII Supplemental Information

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.

Return Reference	Explanation
See Additional Data Table	

Additional Data

Software ID: 22016089
Software Version: 2022v5.0
EIN: 95-2833251
Name: ATP Tour Inc

Supplemental Information

Return Reference	Explanation
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	ATP is exempt from income taxes on income from related activities under Section 501(c)(6) of the U.S. Internal Revenue Code and corresponding state tax law. Certain of its activities are subject to tax on net unrelated business income from those activities. ATP is not considered to be a private foundation under Section 509(a) of the Internal Revenue Code. The Organization has adopted applicable guidance with respect to accounting for uncertainty in income taxes. A tax position is recognized as a benefit only if it is "more likely than not" that the tax position would be sustained in a tax examination, with a tax examination being presumed to occur. The amount recognized is the largest amount of tax benefit that is greater than 50% likely of being realized on examination. For tax positions not meeting the "more likely than not" test, no tax benefit will be recorded. The Organization does not expect the total amount of unrecorded tax benefits to significantly change in the next 12 months. The Organization recognizes interest and/or penalties related to income tax matters in income tax expense. The Organization did not have any amounts accrued for interest and penalties at December 31, 2022 and 2021.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization
ATP Tour Inc

Employer identification number
95-2833251

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on 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 the region	(d) Activities conducted in region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	3	312			83,269,362
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	3	312			83,269,362

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on 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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								

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 ▶ _____

3 Enter total number of other organizations or entities ▶ _____

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on 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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) General Support	East Asia and the Pacific	1	10,000	wire transfer			
(2) general support	Europe (Including Iceland and Greenland)	19	200,123	wire transfer			
(3) general support	Russia and Neighboring States	10	143,132	wire transfer			
(4) general support	South Asia	1	10,000	wire transfer			
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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 separately 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; don't file with Form 990)* 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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* Yes No

Part V Supplemental Information

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.

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 2 Procedures for monitoring use of grant funds	Contributions are made only to qualified recipients.

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 3 Method used to account for expenditures on org's financial statements	CENTRAL AMERICA AND THE CARIBBEAN-Accrual; EAST ASIA AND THE PACIFIC-Accrual; EUROPE (INCLUDING ICELAND AND GREENLAND)-Accrual; MIDDLE EAST AND NORTH AFRICA-Accrual; NORTH AMERICA (CANADA & MEXICO ONLY)-Accrual; RUSSIA AND NEIGHBORING STATES-Accrual; SOUTH AMERICA-Accrual; SOUTH ASIA-Accrual; SUB-SAHARAN AFRICA-Accrual

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part III Method used to account for expenditures on org's financial statements	EAST ASIA AND THE PACIFIC -Accrual EUROPE (INCLUDING ICELAND AND GREENLAND) -Accrual RUSSIA AND NEIGHBORING STATES -Accrual SOUTH ASIA -Accrual

Additional Data

Software ID: 22016089

Software Version: 2022v5.0

EIN: 95-2833251

Name: ATP Tour Inc

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
Central America and the Caribbean	0	1	Program Services	REGIONAL CIRCUIT ADMIN	9,910
East Asia and the Pacific	1	30	Program Services	REGIONAL CIRCUIT ADMIN	8,132,953

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
Europe (Including Iceland and Greenland)	2	226	Program Services	REGIONAL CIRCUIT ADMIN	59,369,701
Middle East and North Africa	0	12	Program Services	REGIONAL CIRCUIT ADMIN	5,323,887

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
North America (Canada & Mexico only)	0	8	Program Services	REGIONAL CIRCUIT ADMIN	3,156,549
Russia and Neighboring States	0	4	Program Services	REGIONAL CIRCUIT ADMIN	2,175,350

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
South America	0	20	Program Services	REGIONAL CIRCUIT ADMIN	2,553,372
South Asia	0	10	Program Services	REGIONAL CIRCUIT ADMIN	700,075

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
Sub-Saharan Africa	0	1	Program Services	REGIONAL CIRCUIT ADMIN	1,208
Europe (Including Iceland and Greenland)	0	0	Investments		1,483,102

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
East Asia and the Pacific	0	0	Grantmaking		10,000
Russia and Neighboring States	0	0	Grantmaking		143,132

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
South Asia	0	0	Grantmaking		10,000
Europe (Including Iceland and Greenland)	0	0	Grantmaking		200,123

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

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

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ATP Tour Inc

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

Employer identification number 95-2833251

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

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 0

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds.	ATP Tour, Inc. makes contributions to qualified charities nominated by players and tournaments. Number of charities and amounts are approved by charity committee on an annual basis after going through the application process. All other contributions to qualified charities must be approved by by a Senior Leadership Member.

Additional Data

Software ID: 22016089
Software Version: 2022v5.0
EIN: 95-2833251
Name: ATP Tour Inc

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
GLOBALGIVING FOUNDATION INC 1 THOMAS CIRCLE NW SUITE 800 WASHINGTON, DC 20005	30-0108263	501(C)(3)	100,000				TENNIS PLAYS FOR PEACE FUNDRAISER
MALIVAI WASHINGTON KIDS FOUNDATION 1096 W 6TH STREET JACKSONVILLVE, FL 32209	59-3559150	501(C)(3)	5,500				OPERATION SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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
ATP TOUR CHARITIES INC 201 ATP TOUR BLVD PONTE VEDRA BEACH, FL 32082	59-3046932	501(c)(3)	350,704				OPERATION SUPPORT

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" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization
ATP Tour Inc

Employer identification number
95-2833251

Part I Questions Regarding Compensation

		Yes	No		
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input checked="" type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </td> </tr> </table>	<input checked="" type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input checked="" type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<input checked="" type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input checked="" type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)				
<p>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</p>	1b	Yes			
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?</p>	2	Yes			
<p>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.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee </td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee			
<input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee				
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p>					
<p>a Receive a severance payment or change-of-control payment?</p>	4a	Yes			
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>	4b		No		
<p>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.</p>	4c		No		
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p>					
<p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p>					
<p>a The organization?</p>	5a				
<p>b Any related organization? If "Yes," on line 5a or 5b, describe in Part III.</p>	5b				
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p>					
<p>a The organization?</p>	6a				
<p>b Any related organization? If "Yes," on line 6a or 6b, describe in Part III.</p>	6b				
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>	7				
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>	8				
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9				

Part III Supplemental Information

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

Return Reference	Explanation
Schedule J, Part I, Line 4a Severance or change-of-control payment	The EVP of human resources received a severance payment in the amount of \$75,104.

Part III Supplemental Information

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

Return Reference	Explanation
Schedule J, Part I, Line 1a	Certain executives are offered first-class fare for long intercontinental flights. BENEFITS CHECKED IN QUESTION 1a APPLY TO SOME OR ALL THE KEY EXECUTIVES LISTED IN PART II OF SCHEDULE J. BENEFITS ARE REPORTED AS TAXABLE IN ACCORDANCE WITH APPLICABLE COUNTRY TAX REGULATIONS. Travel for companions - included in taxable income Massimo Calvellil Andrea Gaudenzi Mark Young Zehra Mesic Irene Wolfe Ross Hutchins Miro Bratoev Alison Lee Club dues - included in taxable income Massimo Calvellil Andrea Gaudenzi Mark Young Zehra Mesic Daniele Sano Alison Lee

Additional Data

Software ID: 22016089
Software Version: 2022v5.0
EIN: 95-2833251
Name: ATP Tour Inc

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1Andrea Gaudenzi CHAIRMAN (NRA)	(i)	0	0	0	0	0	0	0
	(ii)	1,135,647	227,129	59,548	80,703	4,343	1,507,370	0
1Philip Galloway Advisor to CEO	(i)	148,577	25,000	4,770	34,725	29,653	242,725	0
	(ii)	0	0	0	0	0	0	0
2Alison Lee EVP International Group	(i)	208,298	11,446	24,068	22,456	4,913	271,181	0
	(ii)	0	0	0	0	0	0	0
3Brett Byron Sr Legal Counsel	(i)	161,282	21,424	1,848	4,667	27,177	216,398	0
	(ii)	0	0	0	0	0	0	0
4Jeff Reel SVP and General Counsel	(i)	243,281	13,772	8,885	12,520	30,777	309,235	0
	(ii)	0	0	0	0	0	0	0
5Mark Young Chief Legal and Administrative Officer	(i)	749,183	70,480	38,981	19,600	38,359	916,603	0
	(ii)	0	0	0	0	0	0	0
6Massimo Calvelli CEO (NRA)	(i)	622,811	227,566	178,945	26,719	8,781	1,064,822	0
	(ii)	0	0	0	0	0	0	0
7Zehra Mesic CFO	(i)	267,061	51,125	17,422	13,885	31,717	381,210	0
	(ii)	0	0	0	0	0	0	0
8Simon Higson EVP, Communications	(i)	0	0	0	0	0	0	0
	(ii)	193,322	36,578	27,002	50,281	3,205	310,388	0
9Ross Hutchins Chief Tour Officer	(i)	352,882	58,776	82,587	17,644	4,245	516,134	0
	(ii)	0	0	0	0	0	0	0
10Daniele Sano Chief Business Officer	(i)	254,007	49,383	19,407	0	0	322,797	0
	(ii)	0	0	0	0	0	0	0
11Rodolphe Tastet VP, Sales and Sponsorships	(i)	0	0	0	0	0	0	0
	(ii)	119,138	13,105	25,045	29,974	2,829	190,091	0
12Miro Bratoev SVP, Rules and Competition	(i)	181,138	14,832	2,527	9,270	30,895	238,662	0
	(ii)	0	0	0	0	0	0	0
13Eric Starelli EVP Americas	(i)	231,855	13,911	6,775	11,593	9,585	273,719	0
	(ii)	0	0	0	0	0	0	0
14Murray Swartzberg SVP, IT and Systems	(i)	320,384	19,669	17,138	16,391	25,553	399,135	0
	(ii)	0	0	0	0	0	0	0
15Irene Wolfe EVP, Human Resources	(i)	101,271	0	83,853	5,257	13,885	204,266	0
	(ii)	0	0	0	0	0	0	0
16Geoffroy Bourbon EVP, EUROPE	(i)	0	0	0	0	0	0	0
	(ii)	193,097	20,275	27,002	46,847	4,023	291,244	0

SCHEDULE O
(Form 990)

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.

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization
ATP Tour Inc

Employer identification number

95-2833251

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15a PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	Line 15a is answered no as in 2022 NO COMPENSATION REVIEW or adjustment occurred for the T OP MANAGEMENT OFFICIAL. The most recent compensation review for the Top Management Official occurred in 2019. IN THE YEARS WHEN THE ORGANIZATION CONDUCTS A COMPENSATION REVIEW, THE BOARD HAS SOLE AUTHORITY TO HIRE AND APPROVE CHAIRMAN'S/PRESIDENT'S COMPENSATION. AS PART OF THAT PROCESS A SEARCH FIRM IS USUALLY ENGAGED WHO PROVIDES INPUT INTO THE PACKAGE OF COMPENSATION OFFERED. FURTHER RESEARCH IS DIRECTED BY THE BOARD ON COMPARABLE ROLES IN THE INDUSTRY BEFORE ANY COMPENSATION PACKAGE IS OFFERED. The deliberations and decisions of the board on the compensation review are contemporaneously documented.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15b PROCESS TO ESTABLISH COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES	Line 15b was answered no as THERE WERE NO COMPANSATION REVIEWS OF OTHER OFFICERS OR KEY EM PLOYEES IN 2022. The most recent compensation review for Other Officers and Key Employees took place in 2019. IN THE YEARS WHEN The Organization conducts a compensation review, THE BOARD HAS ESTABLISHED A COMPENSATION SUBCOMMITTEE THAT HAS ADVISORY RESPONSIBILITY FOR CO MPENSATION LEVELS OF TOP MANAGEMENT. MANAGEMENT PERFORMS INDUSTRY RESEARCH BOTH DIRECTLY A ND THROUGH INDEPENDENT SURVEYS TO DETERMINE REASONABLENESS OF TOP MANAGEMENT AND OTHER STA FF COMPENSATION. The Compensation committee is composed of independent persons. The delibe rations and decisions of the board on the compensation review are contemporaneously docume nted.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 1a Material differences in voting rights	Executive Chairman's vote is not counted in certain specific matters as indicated in the By-laws.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 6 Classes of members or stockholders	ATP Tour, Inc. is a member organization consisting of both players and tournament owner members.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 7a Members or stockholders electing members of governing body	ATP Tour, Inc. is a member organization consisting of both players and tournament owner members. ATP board members are elected by the respective tournament owner members and by the player members through a player council that is elected by the player members.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 7b Decisions requiring approval by members or stockholders	Appointment and removal of directors - Player and Tournament members elect two or more directors to the board of directors each year. The two member classes, players and tournaments, have the ability to remove their appointed directors by a simple majority vote.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	The 990 return is sent via email to each member of the Board of Directors prior to filing. An independent professional accounting firm prepares and reviews the return, and management is responsible for reviewing Form 990 before filing. A copy of the filed return is made available to each member. The CFO performs a complete review of Form 990 prior to filing.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	Annual declarations for board members and management regarding conflicts of interest are required by policy. A board orientation process which includes a session on dealing with and disclosing conflicts of interest is required for all board members. If COI arise then the conflicted board member may excuse himself from discussions and voting on the conflicted item. COI are considered before any board's discussion or decision making.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	ATP Tour, Inc. does not typically provide governing documents, conflict of interest policy or financial statements to the general public. Such documents are made available to ATP Tour, Inc. members upon request.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VIII, Line 2f Other Program Service Revenue	Other Program Service Revenue - Total Revenue: 4642683, Related or Exempt Function Revenue : 4617362, Unrelated Business Revenue: 25321, Revenue Excluded from Tax Under Sections 512 , 513, or 514: ;

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VIII, Line 11d Other Miscellaneous Revenue	All Other Revenue - Total Revenue: 1245, Related or Exempt Function Revenue: 1245, Unrelated Business Revenue: , Revenue Excluded from Tax Under Sections 512, 513, or 514: ;

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	NET CHANGING BENEFICIAL INTEREST - Tennis Data Innovations - 4710991; NET CHANGING BENEFICIAL INTEREST - ATP Tour Charities - 291192;

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2022

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
ATP Tour Inc

Employer identification number

95-2833251

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) ATP TOUR CHARITIES INC 201 ATP TOUR BLVD PONTE VEDRA BEACH, DE 32082 59-3046932	CHARITY	DE	501(c)(3)	Type II	ATP TOUR INC	Yes	
(2) ATP Member Association 201 ATP Tour Blvd PONTE VEDRA BEACH, FL 32082 85-6155359	non-league activities of ATP Tour	DE	501(c)(6)		ATP Tour Inc	Yes	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
See Additional Data Table									

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

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

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b Gift, grant, or capital contribution to related organization(s)	Yes	
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)	Yes	
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)		No
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o Sharing of paid employees with related organization(s)	Yes	
p Reimbursement paid to related organization(s) for expenses	Yes	
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)ATP Tour Sam	P	4,826,191	FMV
(2)ATP Tour Sam	Q	111,021	FMV
(3)ATP Tour Charities Inc	B	350,704	Cash
(4)TENNIS DATA INNOVATIONS (UK) LIMITED (TDI)	S		Cash
(5)TENNIS DATA INNOVATIONS (UK) LIMITED (TDI)	Q		FMV
(6)ATP TENNIS LIMITED	D	79,676	FMV

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference	Explanation

Additional Data

Software ID: 22016089
Software Version: 2022v5.0
EIN: 95-2833251
Name: ATP Tour Inc

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
ATP TOUR SAM	CIRCUIT ADMIN	MN	ATP TOUR INC	C Corporation	5,035,077		100 %	Yes	
ATP TENNIS LIMITED 59-3427124	DORMANT COMPANY	UK	ATP TOUR INC	C Corporation	0	79,676	100 %	Yes	
Tennis Data Innovations (UK) Limited (TDI)	Holding Company	UK	ATP Tour Inc	C Corporation	99,616,202	82,472,328	79.3 %	Yes	
Tennis Data Innovation Operations (UK) Limited	Data Processing, Hosting & Related Services	UK	TDI	C Corporation				Yes	
Tennis Data Innovations Database (UK) Limited 22-24 Worple Road Wimbledon, London SW104DD UK	Data Processing, Hosting & Related Services	UK	TDI	C Corporation				Yes	
TENNIS DATA INNOVATIONS STREAMING (UK) LTD	Data Processing, Hosting & Related Services	UK	TDI	C Corporation				Yes	
Tennis Data Innovations Database (EU) SARL	Data Processing, Hosting & Related Services	LU	TDI	C Corporation				Yes	
Tennis Data Innovations Database (EU) Limited (TDI Ireland) 1-2 VICTORIA BUILDINGS HADDINGTON ROAD dublin D04XN32 EI	DATA PROCESSING, HOSTING & RELATED SERVICES	UK	TDI	C Corporation				Yes	

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
ATP Tour Sam	P	4,826,191	FMV
ATP Tour Sam	Q	111,021	FMV
ATP Tour Charities Inc	B	350,704	Cash
TENNIS DATA INNOVATIONS (UK) LIMITED (TDI)	S		Cash
TENNIS DATA INNOVATIONS (UK) LIMITED (TDI)	Q		FMV
ATP TENNIS LIMITED	D	79,676	FMV