

DAWN C. ANDERSON, CPA MICHELLE R. BITNER, CPA ROXANNA M. BRANDLE, CPA KYLE ELSENBAUMER, CPA PAUL G. MACK, CPA, CFE GREG R. MOSER, CPA NICHOLAS A. OTTOLINI, CPA JASON L. SERFASS, CPA HEIDI D. WOJCIECHOWSKI, CPA

February 1, 2019

Set Point Tennis Organization Attn: Michael Murphy Po Box 12231 Reading, PA 19612



Re: Form 990-N (e-Postcard)

Dear Michael:

Enclosed is your copy of Form 990-N (e-postcard) for Set Point Tennis Organization for the year ended December 31, 2018, which we have transmitted electronically.

Also, enclosed is the confirmation that the return has been accepted by the IRS.

Your copy of the return should be retained indefinitely.

Very truly yours,

CAMPBELL, RAPPOLD & YURASITS LLP

by

Tara L. Bender, CPA, CSEP

Partner

TLB:sah Enclosures



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Your Form 990-N(e-Postcard) has been submitted to the IRS

Organization Name: SET POINT TENNIS ORGANIZATION

EIN: 300490783Tax Year: 2018

Tax Year Start Date: 01-01-2018
 Tax Year End Date: 12-31-2018

• Submission ID: 10065520190292528060

Filing Status Date: 01-29-2019

· Filing Status: Accepted

Form 999-N

### Electronic Notice (e-Postcard)

OMB No. 1545-2085

Department of the Treasury Internal Revenue Service

for Tax-Exempt Organization not Required to File Form 990 or 990-EZ

2018

Open to Public Inspection

A For the 2018 Calendar year, or tax year beginning 2018-01-01 and ending 2018-12-31

B Check if available Terminated for Business

Gross receipts are normally \$50,000 or less

C Name of Organization: SET POINT TENNIS ORGANIZATION

PO BOX 12231, READING,

PA, US, 19612

D Employee Identification

Number 30-0490783

E Website:

F Name of Principal Officer: MICHAEL MURPHY

PO BOX 12231, READING,

PA, US, 19612

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 6104.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated average times is 15 minutes.

Note: This image is provided for your records only. Do Not mail this page to the IRS. The IRS will not accept this filing via paper. You must file



DAWN C. ANDERSON, CPA MICHELLE R. BITNER, CPA ROXANNA M. BRANDLE, CPA KYLE ELSENBAUMER, CPA PAUL G. MACK, CPA, CFE GREG R. MOSER, CPA NICHOLAS A. OTTOLINI, CPA JASON L. SERFASS, CPA HEIDI D. WOJCIECHOWSKI, CPA

February 12, 2018

Michael Murphy Set Point Tennis Organization PO Box 12231 Reading, PA 19612

Re: Form 990-N (e-Postcard)

Dear Michael:

Enclosed is your copy of Form 990-N (e-postcard) for Set Point Tennis Organization for the year ended December 31, 2017, which has been transmitted electronically.

Very truly yours,

CAMPBELL, RAPPOLD & YURASITS LLP

by

Tara L. Bender, CPA

Partner

TLB:sah Enclosures



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Your Form 990-N(e-Postcard) has been submitted to the IRS

Organization Name: SET POINT TENNIS ORGANIZATION

EIN: 300490783Tax Year: 2017

Tax Year Start Date: 01-01-2017
 Tax Year End Date: 12-31-2017

• Submission ID: 10065520180371708121

Filing Status Date: 02-06-2018

Filing Status: Accepted



FEBRUARY 12, 2018

SET POINT TENNIS ORGANIZATION PO BOX 12231 READING, PA 19612 ATTENTION: MR. MICHAEL MURPHY

DEAR MICHAEL:

ENCLOSED IS THE ORGANIZATION'S EXEMPTION FROM REGISTRATION STATEMENT FOR THE YEAR ENDED DECEMBER 31, 2017, WHICH MUST BE FILED WITH THE PA BUREAU OF CHARITABLE ORGANIZATIONS. YOUR ORGANIZATION IS EXEMPT BECAUSE YOUR CURRENT YEAR CONTRIBUTIONS ARE LESS THAN \$25,000 AND PROGRAM SERVICE REVENUE IS LESS THAN \$5,000,000. PLEASE ADVISE US IMMEDIATELY IF EITHER OF THESE TWO CONDITIONS CHANGE BECAUSE YOU MAY BE REQUIRED TO REGISTER WITH THE BUREAU WITHIN 30 DAYS OF REACHING EITHER OF THESE THRESHOLDS.

BECAUSE THE ORGANIZATION IS EXEMPT, ITEMS 4-10 DO NOT PERTAIN TO YOUR ORGANIZATION AND DO NOT NEED TO BE COMPLETED.

THE FORM SHOULD BE SIGNED BY AN AUTHORIZED OFFICER, AND MAILED ON OR BEFORE FEBRUARY 15, 2018.

MAIL TO - PA DEPARTMENT OF STATE
BUREAU OF CHARITABLE ORGANIZATIONS
207 NORTH OFFICE BUILDING
HARRISBURG, PA 17120

NO PAYMENT IS DUE.

A COPY OF THE FORM IS ENCLOSED FOR YOUR FILES. WE SUGGEST THAT YOU RETAIN THIS COPY INDEFINITELY.

VERY TRULY YOURS,

Jana

TARA L. BENDER, CPA, CSEP PARTNER

(Rev. 5/03)

(717) 783-1720 1-800-732-0999 (WITHIN PA) FAX (717) 783-6014

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CHARITABLE ORGANIZATIONS 207 NORTH OFFICE BUILDING HARRISBURG, PA 17120

### Institution of Purely Public Charity Registration Statement For the Fiscal Year Which Ended: 12-31-2017

Exempt from registration. (Give CURRENT YEAR CONTRIBU SERVICE REVENUE IS LE	TICL HILL I	mplete items #1-#3, and sign below.) HAN \$25,000 AND PROGRAM
1. Employer Identification #30-0	0490783	Registration # (If known)
2. Legal name of organization: SET	POINT TENNIS OF	RGANIZATION
3. c/o MICHAEL MURPHY		
Street address PO BOX 12231	L	
City_READING	State PA	Zip Code19612
Telephone # 404 030-4302	800 Telephon	e#
6. Does your organization shat corporation or unicorporated asso address, type of organization, and relation.  7. Does any other domestic or organization or does your organization or does your organization organization? Yes No foreign organization: name and type and relationship of organization to your organization to your solutions. Attach a complete copy of your covered by this registration statements.	are revenue or form ciation? Yes No ionship to your organization ration own a 10% or (If "yes", attach the pe of organization.)  Torganization.)  Torganization's IRS 990 at. (Make sure you include	own a 10% or greater interest in your greater interest in any other domestic or ne following information for each domestic or nether organization is for-profit or nonprofit,
Complete the following		
		t to file the IRS 990 Return
0. An extension of time until	is reque	sted for filing our IRS 990 Return.
		herein is true and correct to the best of my
SIGNATURE OF AUTHORIZ	ZED OFFICIAL	-
TYPE OR PRINT NAME AI AUTHORIZED OFFICIAL OF TH	ND TITLE OF E ORGANIZATION	DATE



February 13, 2017

Michael Murphy Set Point Tennis Organization PO Box 12231 Reading, PA 19612

Re: Form 990-N (e-Postcard)

Dear Michael:

Enclosed is your copy of Form 990-N (e-postcard) for the Set Point Tennis Organization for the year ended December 31, 2016, which we have transmitted electronically. Also, enclosed is the confirmation that the return has been accepted by the IRS.

Your copy of the return should be retained indefinitely.

Very truly yours,

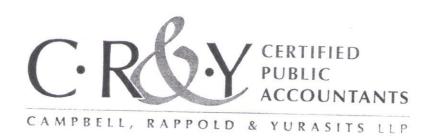
CAMPBELL, RAPPOLD & YURASITS LLP

by

Tara L. Bender, CPA, CSEP

Partner

TLB:sah Enclosures



FEBRUARY 13, 2017

SET POINT TENNIS ORGANIZATION PO BOX 12231 READING, PA 19612 ATTENTION: MR. MICHAEL MURPHY

DEAR MICHAEL:

ENCLOSED IS THE ORGANIZATION'S EXEMPTION FROM REGISTRATION STATEMENT FOR THE YEAR ENDED DECEMBER 31, 2016, WHICH MUST BE FILED WITH THE PA BUREAU OF CHARITABLE ORGANIZATIONS. YOUR ORGANIZATION IS EXEMPT BECAUSE YOUR CURRENT YEAR CONTRIBUTIONS ARE LESS THAN \$25,000 AND PROGRAM SERVICE REVENUE IS LESS THAN \$5,000,000. PLEASE ADVISE US IMMEDIATELY IF EITHER OF THESE TWO CONDITIONS CHANGE BECAUSE YOU MAY BE REQUIRED TO REGISTER WITH THE BUREAU WITHIN 30 DAYS OF REACHING EITHER OF THESE THRESHOLDS.

BECAUSE THE ORGANIZATION IS EXEMPT, ITEMS 4-10 DO NOT PERTAIN TO YOUR ORGANIZATION AND DO NOT NEED TO BE COMPLETED.

THE FORM SHOULD BE SIGNED BY AN AUTHORIZED OFFICER, AND MAILED ON OR BEFORE MAY 15, 2017.

MAIL TO - PA DEPARTMENT OF STATE
BUREAU OF CHARITABLE ORGANIZATIONS
207 NORTH OFFICE BUILDING
HARRISBURG, PA 17120

NO PAYMENT IS DUE.

A COPY OF THE FORM IS ENCLOSED FOR YOUR FILES. WE SUGGEST THAT YOU RETAIN THIS COPY INDEFINITELY.

VERY TRULY YOURS,

Your & Bend

TARA L. BENDER, CPA, CSEP

PARTNER

(Rev. 5/03)

(717) 783-1720 1-800-732-0999 (WITHIN PA) FAX (717) 783-6014

# COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE BUREAU OF CHARITABLE ORGANIZATIONS 207 NORTH OFFICE BUILDING HARRISBURG, PA 17120

## Institution of Purely Public Charity Registration Statement For the Fiscal Year Which Ended: 12-31-2016

Exempt from registration. (Give	reason for exemption,	complete items #1-#3, and sign below.)
REVENUE IS LESS THAN		THAN \$25,000 AND PROGRAM SERVICE
1. Employer Identification #_ 30-0	1490783	Registration # (If known)
2. Legal name of organization: SET	POINT TENNIS	ORGANIZATION
3. c/o MICHAEL MURPHY		TON TON
Street address PO BOX 12231		
City_READING	State PA	Zip Code 19612
relephone # ==== ==============================	800 Telepho	one #
4. Date organized://		
in yes , attach a co	opy of revocation.)	een revoked by the Internal Revenue Service?
corporation or unicorporated associated asso	Ciation? Tes No	mal governance with any other nonprofit  (If "yes", attach explanation listing name, name,
foreign organization? Yes No	ation own a 10% o  (If "yes", attach  pe of organization, w	or own a 10% or greater interest in your or greater interest in any other domestic or the following information for each domestic or whether organization is for-profit or nonprofit,
8. Attach a <u>complete</u> copy of your covered by this registration statement	organization's IRS 9: t. (Make sure you include	90 Return and Schedule A for the fiscal year de copies of <u>all</u> pages and attachments.)
9. Please include \$15 filing fee. (M. Pennsylvania".)	lake check or money	order made payable to the "Commonwealth of
Complete the following if	f an extension is need	ed to file the IRS 990 Return
10. An extension of time until	is requ	uested for filing our IRS 990 Return.
I do hereby declare that the knowledge, information, and belief.	information contained	herein is true and correct to the best of my
SIGNATURE OF AUTHORIZ	ED OFFICIAL	
TYPE OR PRINT NAME AN		DATE
AUTHORIZED OFFICIAL OF THI	E ORGANIZATION	559000 T T



MARCH 16, 2016

SET POINT TENNIS ORGANIZATION PO BOX 12231 READING, PA 19612 ATTENTION: MR. MICHAEL MURPHY

RE: FORM 990-N (E-POSTCARD)

DEAR MICHAEL:

ENCLOSED IS YOUR COPY OF FORM 990-N (E-POSTCARD) FOR SET POINT TENNIS ORGANIZATION FOR THE YEAR ENDED DECEMBER 31, 2015, WHICH WE HAVE TRANSMITTED ELECTRONICALLY. ALSO ENCLOSED IS THE CONFIRMATION THAT THE RETURN HAS BEEN ACCEPTED BY THE IRS.

YOUR COPY OF THE RETURN SHOULD BE RETAINED INDEFINITELY.

VERY TRULY YOURS,

Yaru

TARA L. BENDER, CPA, CSEP PARTNER

CLIENT COPY



### Manage Form 990-N (e-Postcard)

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EIN	Organization Name	Tax Year	End Date	Created On	Status	Submission ID	Action
30- 0490783	SET POINT TENNIS ORGANIZATION	2015	12-31- 2015	03-14-2016	Accepted	10065520160740028469	
		««« Prev	Page 1	▼ Next »»»			

CREATE NEW FILING

CLIENT COPY



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Your Form 990-N(e-Postcard) has been submitted to the IRS

- · Organization Name: SET POINT TENNIS ORGANIZATION
- · EIN: 300490783
- · Tax Year: 2016
- · Tax Year Start Date: 01-01-2016
- Tax Year End Date: 12-31-2016
- · Submission ID: 10065520170440828556
- · Filing Status Date: 02-13-2017
- · Filing Status: Accepted

Form 990-N

#### Electronic Notice (e-Postcard)

Department of the Treasury Internal Revenue Service

for Tax-Exempt Organization not Required to File Form 990 or 990-EZ

OMB No. 1545-2085

2016

Open to Public Inspection

A For the 2016 Calendar year, or tax year beginning 2016-01-01 and ending 2016-12-31

B Check if available

C Name of Organization. SET POINT TENNIS ORGANIZATION D Employee Identification

Terminated for Business Gross receipts are normally \$50,000 or less

PO BOX 12231, READING,

Number 30-0490783

PA, US, 19612

E Website

www.setpointtennis.org

F Name of Principal Officer: Michael Murphy

43 Meadow Court, Sinking Spring, PA, US, 19608

Privacy Act and Paperwork Reduction Act Notice: We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws

The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a The organization is not required to provide information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in code section 6104.

The time needed to complete and file this form and related schedules will vary depending on the individual circumstances. The estimated average times

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Your Form 990-N(e-Postcard) has been submitted to the IRS

Organization Name: SET POINT TENNIS ORGANIZATION

• EIN: 300490783

• Tax Year: 2015

Tax Year Start Date: 01-01-2015
 Tax Year End Date: 12-31-2015

Submission ID: 10065520160740028469

• Filing Status Date: 03-14-2016

· Filing Status: Pending

Note: Print a copy of this filing for your records. Once you leave this page, you will not be able to do so.