For	139 04/02/2015 B 54 AM m 9990 rtment of the Treasury	Return of Organization Exempt From Income Ta Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private fou Do not enter Social Security numbers on this form as it may be made public.	ndations)	OMB No 1545-0047 2013 Open to Public
Interr	nal Revenue Service	▶ Information about Form 990 and its instructions is at www.irs.gov/form990		Inspection
A	For the 2013 cale	ndar year, or tax year beginning 09/01/13 , and ending 08/31/14		
B	Check d'applicable C	Name of organization	D Employer	Identification number
	Address change	LITTLE LEAGUE BASEBALL, INC.		
	Name change	Doing Business As	76-0	361979
\equiv	_	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telephone	number
	nibal return	P.O. BOX 2188	409-	718-8325
П.	Terminated	City or town, state or province, country, and ZIP or foreign postal code		
	Amended return	NEDERLAND TX 77627	G Gross receipts	s 745,702
	Application pending F	Name and address of principal officer		dinales? Yes X No
' ب	The state of the s	ROBB CAHAL	group return for subor	
		10.01.	subordinates included	Yes No
_	Maria Maria	REDERINA IX //OZ/	No," attach a list (see	instructions)
1	Tax-exempt status	X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527		
J	Website. ▶ N/3	H(c) Group	exemption number	3158
K	Form of organization	X Corporation Trust Association Other ► L Year of formation	1979 м	State of legal domicile TX
P	art I Sum	mary		
	,	be the organization's mission or most significant activities		
Activities & Governance	TO PRO	OVIDE YOUTH RECREATION AND EDUCATION THROUGH LOCAL BASEBAL	L TEAMS.	
шаг				
Ve	2 Chack this h	ox ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net as:	eets	
Ğ		oting members of the governing body (Part VI, line 1a)	3	17
ජ ර ග		ndependent voting members of the governing body (Part VI, line 1b)		17
itie		or of individuals employed in calendar year 2013 (Part V, line 2a)		0
÷		er of volunteers (estimate if necessary)		17
ĕ	U.	ed business revenue from Part VIII, column (C), line 12	7a	0
		d business taxable income from Form 990-T, line 34	7b	0
	o net unrelate		Year	Current Year
_	8 Contribution	s and grants (Part VIII, line 1h)		633,100
Revenue		vice revenue (Part VIII, line 2g)	90,029	112,533
Ve	_	ncome (Part VIII, column (A), lines 3, 4, and 7d)	366	-12,684
ď	/	ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
	I	ue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	90,395	732,949
_		similar amounts paid (Part IX, column (A), lines 1–3)		0
	1	d to or for members (Part IX, column (A), line 4)		0
(A		ner compensation, employee benefits (Part IX, column (A), lines 5–10)		0
se	1	I fundraising fees (Part IX, column (A), line 11e)		0
Expenses		ising expenses (Part IX, column (D), line 25)		
Щ		ises (Part IX, column (A), lines 11a-11d, 11f-24e)	105,335	119,213
	I Guioi anpai	the transfer of the transfer o		

Signature Block Part II Under penalties of penjury, 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

			- 11							
Sign Here	Signatur	\leq	- Call	James	Robb (ahal	President	4/8	15		
Paid	Print/Type prepar	rer's nar	ne and title	Preparer's signature	morralile	Date 04/0:	Ch.	eck if	PTIN P0108333	34
Preparer	Firm's name	•	Mazur & Verno	on, CPA's	- X ()		Firm's EIN	7	4-1593	672
Use Only	Firm's address	>	PO Box 1916 Nederland, TX	x 77627			Phone no	40	9-729-	1234
May the IR	S discuss this	return	with the preparer shown abo	ve? (see instruction	ns)				X Yes	No

18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

20 Total assets (Part X, line 16)

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2013)

119,213

613,736

653,687

687

0

End of Year

653,

105,335

-14,940

39,951

39,951

0

Beginning of Current Year

rm 990 (2013) LI	TTLE LEAGUE	BASEBALL,	INC.	76-0	361979			Page 2
	ement of Program			line in this Pa	ort 111			
	he organization's missio		se or note to any	nne in tins re	111 111			
TO PROVIDE	YOUTH RECF	EATION AND	D EDUCATION	THROUGH	i LOCAI	BASEBALI	TEAMS.	
					J 1			
pnor Form 990 o	tion undertake any signi r 990-EZ? e these new services on		ces during the year wi	nich were not list	ed on the		Yes	X No
3 Did the organization services?	tion cease conducting, o	r make significant d	hanges in how it cond	ucts, any prograi	m		Yes	X No
	these changes on Sch		to for each of its throa	largest program	COD41000 00	maneurad by		
expenses Section	anization's program sen on 501(c)(3) and 501(c)(es, and revenue, if any, i	4) organizations are	required to report the					
4a (Code PROVIDING) (Expenses \$ YOUTH RECRE	119,213 ATION AND			LOCAL) (Revenue \$	TEAMS.	(
		0 - 14, 6 - ₁₁	t des secto ef	e.) (Revenue \$		
4b (Code) (Expenses \$		including grants of	3) (Revenue \$		
4c (Code) (Expenses \$		including grants of	\$	***) (Revenue \$		
						Ē		
· -	services (Describe in Sc							
(Expenses \$	anuna avnarasa N	including grants	of \$,213) (F	Revenue \$			
4e Total program s	CIAINE EVACUACA	119	,225		_		Form	990 (20

10111000 12010			
Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		<u>x</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7.		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	1		
	complete Schedule D, Part VI	11a	X	
b	Oid the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			Cetto
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	The state of the s		-	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	DIAMETER AND A STATE OF THE STA			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		,	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a				
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	0.0		
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			2200
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes." complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

197 Note. All Form 990 filers are required to complete Schedule O

$\overline{}$	n 990 (2013) LITTLE LEAGUE BASEBALL, INC. 76-0361979		P	age 4
_Pa	art IV Checklist of Required Schedules (continued)		l van l	Ma
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Yes	No
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			ľ
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	46.7		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	4		
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or	1		
	disqualified persons? If so, complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	4		l
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	3	in .	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	8		
	Schedule L, Part IV	28b	-	Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			17
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	-	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			x
	conservation contributions? If "Yes," complete Schedule M	30	-	^
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		x
•	Part I	31		-
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	32		x
0.0	complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
24	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	- 55		-
34	or IV, and Part V, line 1	34		x
35a	540/hV4000	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
•	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1	1	
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

14a

14b

X

13c

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

409-718-8325 Form 990 (2013)

144 STERLING RIDGE DRIVE

TX 77627

organization >

NEDERLAND

financial statements available to the public during the tax year

KIMBERLY MCGUIRE

State the name, physical address, and telephone number of the person who possesses the books and records of the

Form 000 /2013	T.TTTT.E.	LEAGUE	BASEBALL,	TNC
UIII 990 (2013)	TIENGUE	DROBURUH,	TIAC .

76-0361979

Page 7

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 instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
 organization, more than \$10,000 of reportable compensation from the organization and any related organizations
 List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest
 compensated employees, and former such persons

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

(A) Name and Title	(B) Average hours per week (list any	bo of	x, unk ficer a	ess pe nd a d	nore rson i	than one is both an or/trustee)		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated emount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensaled employee	Former	(W-2/1098-MISC)	(172.000.11100)	organization and related organizations
(1) ROBB CAHAL						П				
Į.	30.00					ΙI				
PRESIDENT	0.00		_	X				0	0	
(2) KEVIN JACKSON										
	10.00					1 1				
VICE-PRESIDENT	0.00	_	_	X		\sqcup		0	0	
(3) KRISTEN GRANT										
	1.00									
SECRETARY	0.00			X				0	0	
(4) KIMBERLY MCGUIRE		1		Į.						
	8.00					1				
TREASURER	0.00			X				0	0	C
(5) PRISCILLA SEYMOUT	R									
	20.00		1			1				
PLAYER AGENT	0.00			X				0	0	C
(6) JASON KOTZ								370		
	20.00	1			l					
FUNDRAISING MANAGER	0.00	1	_	X				0	0	(
(7) JIMMY HARRISON	S	1				100				
	20.00	Į.						Ì		9
UMPIRE COORDINATOR	0.00	1		X				0	0	
(8) HOLLY SINGLETON		\Box	Г							
V Control Control	30.00	1	1			1				
CONCESSION MANAGER	0.00			X				0	0	(
(9) BRENT BUTLER										
	9.00		1	1						
SAFETY OFFICER	0.00	1	ſ	x		1		0	0	C
(10)MICHAEL CRAIG		T	Г							
	3.00		1	ĺ						
INFORMATION OFFICER	0.00	1	1	x				0	0	
(11)MIKE LOUVIER			Г							
	15.00	1		1	1					1
EQUIPMENT MANAGER	0.00	1	1	x	1	T		0		l c

Part VII Section A. Officers (A) Name and title	(B) Average hours per week (list eny	(d bo	o not x, unio ficer a	Pos check ess pe	C) alkon more erson i	than or is both ir/truste	ne an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estimal amount other compens from ti	led t of r sation	
	related organizations below dotted (ine)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensaled employee	Former	(W-2/1099-MISC)			organiza and rela organiza	ation ated	
(12)ED SEYMOUR	15.00												
FIELD 1 REP (13) JEREMY TINSLEY	0.00		-	X		Н	-	0	0				0
FIELD 1 REP ASSIST	8.00 0.00			x				0	0				0
(14) JASON CAYWOOD													
FIELD REP	1.00			x				0	0				0
(15) STEVE SINGLETON	0.00			-									
Maria Ma	8.00												
FIELD REP	0.00	-	_	X	-	_	-	0	0			_	0
(16) CHRIS BROWN	8.00						1	1					
FIELD REP	0.00			x				0	0				0
(17) KEITH SPIVEY													
FIELD REP	4.00			x				0	o				0
(18)	0.00												
	,												
(19)		-	-	-	-	-	-	 					
(10)													
1b Sub-total					-		•						
c Total from continuation shee d Total (add lines 1b and 1c)	ets to Part VII, S	ectio	on A				>	1411	12.5		-		
2 Total number of individuals (inc				ose	liste	d abo	ove) who received more than \$1	00,000 in				
reportable compensation from	the organization	—	0	_	_	-	_					Yes	No
3 Did the organization list any for								yee, or highest compensated	1		3		x
employee on line 1a? If "Yes," For any individual listed on line organization and related organ	1a, is the sum o	frep	ortat	ole co	amo	ensat	tion	and other compensation from	m the				
individual											4		X
5 Did any person listed on line 1s for services rendered to the or	a receive or acco	ue co	ompe	nsat	ion i	rom a	any	unrelated organization or in-	dividual		5		x
Section B. Independent Contracto			Ollip	icto.									
Complete this table for your five compensation from the organization.	e highest compe	nsate	nı be	depe	nde	nt cor	ntra	actors that received more that	n \$100,000 of the organization's tax year				
	(A) business address	пре	10011	01110		· Cuito	Ī	Descrip	(B) plion of services		Co	(C) mpensal	tion
Trains on			***									-	
A		_	_				╁				├	—	
		-	_	_			+				-		
2 Total number of independent of	ontractors (inclin	dine !	hut z	ot lir	niter	i in th	100	e listed above) who		_		- 500	
received more than \$100,000 c	of compensation	from	the	orga	nıza	tion Þ	<u> </u>		0		<u> </u>	001	0 (2013)
DAA											FOR	m 331	(2013)

Part VIII Statement of Revenue ·Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax (A) Total revenue (C) Unrelated exempt function pusiness under sections 512-514 revenue , Grants 1a Federated campaigns 1a 1b b Membership dues 1c c Fundraising events 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 633,100 g Noncash contributions included in lines 1a-1f 633,100 h Total. Add lines 1a-1f Program Service Revenue Busn Code 85,692 85,692 2a CANDY/BBQ/HERITAGE FEST 25,231 25,231 b CONCESSIONS 1,610 1,610 BASEBALL FEES f All other program service revenue 112,533 g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, 69 69 and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ii) Personal (i) Real 6a Gross rents b Less rental exps C Rental inc or (loss) • d Net rental income or (loss) 7a Gross amount from (i) Secunties (a) Other sales of assets other than inventory b Less cost or other 12,753 basis & sales exps -12,753 c Gain or (loss) -12,753 -12,753 d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses • c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV. line 19 b Less direct expenses . c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 11a b d All other revenue Total. Add lines 11a-11d 732,949 99,849 12 Total revenue. See instructions

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must co Check if Schedule O contains a respo			ete column (A)	X
			(B)	(0)	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	(C) Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and		CAPATIAGO	gorioral expenses	единаса
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the		J		
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified		1		
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B) Other salanes and wages				~ ~ ~
8	Pension plan accruals and contributions (include			-	
o	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal	900	900		
C	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	7990			
9	Other (If line 11g amount exceeds 10% of line 25, column		44.450		
	(A) amount, list line 11g expenses on Schedule O)	46,059	46,059		
12	Advertising and promotion	F 550	F 57.6		
13	Office expenses	5,576	5,576		
14	Information technology				
15	Royalties	22,459	22,459		-4
16 17	Occupancy Travel	22,433	2,2/100		
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,159	2,159		
23	Insurance				
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)	40.060	42.060		
a	COGS	42,060	42,060		
b					1.0
c					
d e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	119,213	119,213	0	0
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 ► if following SOP 98-2 (ASC 958-720)				1

art :						
	Check if Schedule O contains a response or note to	any lir	e in this Part X			
	Α.			(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing			21,578	1	535,69
2	Savings and temporary cash investments				2	
3	Pledges and grants receivable, net				3	
4	Accounts receivable, net				4	
5	Loans and other receivables from current and former office	ers, dir	ectors,			
	trustees, key employees, and highest compensated employees	oyees	χ.			
	Complete Part II of Schedule L			5		
6	Loans and other receivables from other disqualified perso	defined under section				
	4958(f)(1)), persons described in section 4958(c)(3)(B), a					
	sponsoring organizations of section 501(c)(9) voluntary er					
	organizations (see instructions) Complete Part II of Schee		,		6	
7	Notes and loans receivable, net			7		
8	Inventories for sale or use		E E		8	
9	Prepaid expenses and deferred charges			9		
	Land, buildings, and equipment cost or	1		***		
	other basis Complete Part VI of Schedule D	10a	29,954		1	
Ь	Less accumulated depreciation	10b	26,492	18,373	10c	3,462
11	Investments—publicly traded securities			11		
12	Investments—other secunties See Part IV, line 11			12		
13	Investments—program-related See Part IV, line 11			13		
14	Intangible assets	Į.		14		
15	Other assets See Part IV, line 11			15	114,530	
16	Total assets. Add lines 1 through 15 (must equal line 34)			39,951	16	653,68
17	Accounts payable and accrued expenses			17		
18	Grants payable				18	
19	Deferred revenue				19	
20	Tax-exempt bond liabilities				20	
21	Escrow or custodial account liability Complete Part IV of	Schedu	ite D		21	
22	Loans and other payables to current and former officers, of					
	trustees, key employees, highest compensated employee		-,			
	disqualified persons Complete Part II of Schedule L				22	
23	Secured mortgages and notes payable to unrelated third	parties			23	
24	Unsecured notes and loans payable to unrelated third par				24	
25	Other liabilities (including federal income tax, payables to		third			
	parties, and other liabilities not included on lines 17-24)					
	of Schedule D				25	
26	Total liabilities. Add lines 17 through 25			0	26	
	Organizations that follow SFAS 117 (ASC 958), check	here	and			
	complete lines 27 through 29, and lines 33 and 34.		_			
27	Unrestricted net assets				27	
28	Temporanly restricted net assets				28	
29	•				29	
	Organizations that do not follow SFAS 117 (ASC 958)	, chec	k here ▶ 🕱 and			
l	complete lines 30 through 34.					
30	_				30	
31	Paid-in or capital surplus, or land, building, or equipment	fund			31	
32	Retained earnings, endowment, accumulated income, or		ınds	39,951	32	653,687
33	Total net assets or fund balances			39,951		653,687
34	Total liabilities and net assets/fund balances			39,951	34	653,687

Form	990 (2013) LITTLE LEAGUE HASEBALL, INC. 76-0361979				Pag	e 12
Pa	rt XI Reconciliation of Net Assets					r-4:
	Check if Schedule O contains a response or note to any line in this Part XI					ŢŢ
1	Total revenue (must equal Part VIII, column (A), line 12)	1				149
2	Total expenses (must equal Part IX, column (A), line 25)	2			incise market by the same	213
3	Revenue less expenses Subtract line 2 from line 1	3				736
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3	9,5	951
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Pnor period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				_	
	33, column (B))	10		65	3,6	587
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					11
			_		Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			- 1	- 1	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			- 1		
	Schedule O			- 1	- 1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		<u>x</u>
	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					70
b	Were the organization's financial statements audited by an independent accountant?			2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both				- 3	
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			- 1		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		<u> </u>	2c	_	
	If the organization changed either its oversight process or selection process during the tax year, explain in			- 1		į.
	Schedule O			- 1		
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?		_	3a		X
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			3b		
_				Form	n 99(0 (2013)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

2013

Open to Public Inspection

Employer Identification number Name of the organization LITTLE LEAGUE BASEBALL, INC. 76-0361979 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III-Functionally integrated d Type III-Non-functionally integrated b Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No 11g(l) (iii) below, the governing body of the supported organization? 11g(il) (ii) A family member of a person described in (i) above? 11g(lil) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (v) Did you notify (vi) is the (iv) is the organization (viii) Amount of monetary (III) Type of organization (I) Name of supported (II) EIN in col (i) listed in your the organization in rganization in col support (described on lines 1-9 organization col (I) of your (I) organized in the above or IRC section governing document? support? US? (see Instructions)) No Yes Yes No (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2013

Page 2

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

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

Sec	tion A. Public Support							
	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")		443					
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4				l			
	tion B. Total Support		W10040	(-) 0044	T (4) 0040	(5) 2045		(D. Talal
	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
7	Amounts from line 4					-	\rightarrow	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carned on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10				L			
12	Gross receipts from related activities, etc. (12	
13	First five years. If the Form 990 is for the		second, third, four	th, or fifth tax year	as a section 501(c)	(3)		► [T]
	organization, check this box and stop here		-					
Sec	tion C. Computation of Public Su	The state of the s		45)				%
14	Public support percentage for 2013 (line 6,			(1))			15	%
15	Public support percentage from 2012 Sche 33 1/3% support test—2013. If the organi			3 and line 14 is 33	1/3% or more che	ck this		
16a	box and stop here. The organization qualif				17576 01 111010, 010	ok ting		• •
	33 1/3% support test—2012. If the organi				is 33 1/3% or more	e.		
b	check this box and stop here. The organiz					•		▶ □
17a		3. If the organization	on did not check a	box on line 13, 16a	a, or 16b, and line 1	14 is		-
	10% or more, and if the organization meets	the "facts-and-circ	cumstances" test, o	check this box and	stop here. Explain	ın		
	Part IV how the organization meets the "fac	cts-and-circumstan	ces" test. The orga	nization qualifies a	s a publicly suppor	ted		
	organization		_					▶ 🗀
b	10%-facts-and-circumstances test—201	12. If the organization	on did not check a	box on line 13, 16a	a, 16b, or 17a, and	line		
	15 is 10% or more, and if the organization is	meets the "facts-an	id-circumstances"	test, check this box	and stop here.			
	Explain in Part IV how the organization me	ets the "facts-and-o	circumstances" tes	t The organization	qualifies as a publi	cly		► <i>[</i> **1
	supported organization							
18	Private foundation. If the organization did instructions	not check a box of	n line 13, 16a, 16b	, 17a, or 17b, chec	K INIS DOX AND SEE			▶ []

Page 3

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

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

Sec	tion A. Public Support						
	idar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual						
2	grants *) Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	9,875	15,624	70,957	90,395	112,602	509,329
3	Gross receipts from activities that are not an unrelated trade or business under section 513			1			
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	131,030	129,844	73,718	90,395	745,702	1,170,689
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						1,170,689
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	131,030	129,844	73,718	90,395	745,702	1,170,689
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	78	50	48		69	245
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	78	50	48		69	245
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	131,108	129,894	73,766	90,395	745,771	1,170,934
14	First five years. If the Form 990 is for the organization, check this box and stop here		econd, third, fourth	n, or fifth tax year as	s a section 501(c)(3)) 	▶□
Sec	tion C. Computation of Public Su	pport Percenta	ge				
15	Public support percentage for 2013 (line 8,	column (f) divided b	y line 13, column (n)		15	99.98%
16	Public support percentage from 2012 Sche	dule A, Part III, line	15			16	88.16%
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2013 (lin			olumn (f))		17	%_
18	Investment income percentage from 2012					18	%
19a	33 1/3% support tests—2013. If the organ 17 is not more than 33 1/3%, check this box						► X
_	17 is not more than 33 1/3%, check this bot 33 1/3% support tests—2012. If the organ	x anu stop nere. In	e organization qua k a hay an line 14	ortine 19a and line	16 is more than 3	3 1/3%, and	- =
b	line 18 is not more than 33 1/3%, check this	hadion did not chec s hay and etan hare	. The organization	qualifies as a public	cly supported orga	nization	▶ []
20	Private foundation. If the organization did	not check a box on	line 14, 19a, or 19	b, check this box ar	nd see instructions		b

Schedule A (Form 990 or 990-EZ) 2013 LITTLE LEAGUE BASEBALL, INC.

76-0361979

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Name of the organization					Employer Identification number		
LITTLE LEAGUE BASEBALL, INC.					361979		
Part I Organizations Maintaining Donor Advised For Complete If the organization answered "Yes" to			ds or Other Similar Funds or Approx 990, Part IV, line 6	ccounts	counts.		
			(a) Donor advised funds	(b) Funds and other accounts		
1	Total num	aber at end of year					
2		e contributions to (during year)					
3		e grants from (during year)					
4		e value at end of year					
5		ganization inform all donors and donor advisors in writing that the	ne assets held in donor advised				
_		the organization's property, subject to the organization's exclus			Yes N		
6		ganization inform all grantees, donors, and donor advisors in wi					
		hantable purposes and not for the benefit of the donor or donor					
		impermissible private benefit?			Yes N		
Pa	rt II	Conservation Easements.					
		Complete if the organization answered "Yes" to Fe	orm 990, Part IV, Iine 7				
1	Purpose(s) of conservation easements held by the organization (check a					
	-	ervation of land for public use (e.g., recreation or education)	Preservation of an historically imp	ortant land	area		
	-	ction of natural habitat	Preservation of a certified historic	structure			
		ervation of open space					
2		lines 2a through 2d if the organization held a qualified conserva	ation contribution in the form of a conserva-	tion			
		t on the last day of the tax year			Held at the End of the Tax Ye		
а	Total nun	nber of conservation easements		2a			
b	Total acre	eage restricted by conservation easements		2b			
C		of conservation easements on a certified historic structure include	led in (a)	2c			
		of conservation easements included in (c) acquired after 8/17/06					
		tructure listed in the National Register		2d			
3	Number	of conservation easements modified, transferred, released, extir	nguished, or terminated by the organization	during the			
	tax year l						
4	Number	of states where property subject to conservation easement is loc	cated >				
5	Does the	organization have a written policy regarding the periodic monitor	ring, inspection, handling of				
		, and enforcement of the conservation easements it holds?			Yes N		
6	Staff and	volunteer hours devoted to monitoring, inspecting, and enforcing	ig conservation easements during the year				
7	Amount o	of expenses incurred in monitoring, inspecting, and enforcing co	nservation easements during the year				
	\$						
8	Does ead	ch conservation easement reported on line 2(d) above satisfy th	e requirements of section 170(h)(4)(B)				
		ection 170(h)(4)(B)(ii)?			∐ Yes ∐ N		
9	In Part X	III, describe how the organization reports conservation easemen	nts in its revenue and expense statement,	and			
		sheet, and include, if applicable, the text of the footnote to the or	ganization's financial statements that desc	ribes the			
		tion's accounting for conservation easements	Historical Transporter or Other S	Similar A			
Pi	art III	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to F	form 990, Part IV, line 8				
1a	If the ora	anization elected, as permitted under SFAS 116 (ASC 958), not		ance sheet			
	works of	art, historical treasures, or other similar assets held for public e	xhibition, education, or research in furthera	ince of			
	public se	rvice, provide, in Part XIII, the text of the footnote to its financial	statements that describes these items				
b	If the org	anization elected, as permitted under SFAS 116 (ASC 958), to	report in its revenue statement and balance	e sheet			
	works of	art, historical treasures, or other similar assets held for public e	xhibition, education, or research in furthera	ince of			
		rvice, provide the following amounts relating to these items					
		enues included in Form 990, Part VIII, line 1		•	\$		
	(II) Asse	ets included in Form 990, Part X		•	\$		
2	If the org	anization received or held works of art, historical treasures, or o	ther similar assets for financial gain, provid	de the			
	following	amounts required to be reported under SFAS 116 (ASC 958) re	elating to these items:		II.		
а	Revenue	s included in Form 990, Part VIII, line 1		1120	\$		
b	Assets	ncluded in Form 990. Part X			\$		

Sche	dule D (For	m 990) 2013	LITTLE	LEAGUE	BASEB	ALL, I	NC.		76-0	361979	Page 2
_Pa	rt III	Organizatio	ons Maintair	ning Collec	tions of A	Art, Histo	rical Tr	easures, c	r Other	Similar Assets	(continued)
3		brganization's a tems (check all	acquisition, acce I that apply)	ession, and oth	er records, c	check any of	the follow	ring that are a	sıgnıfican	t use of its	
a	Public	exhibition			d 🗍 L	oan or exch	ange prog	grams			
b	Schola	arly research) - -1	Other					
C	Prese	vation for futur	e generations								
4	Provide a	description of th	he organization's	s collections ar	nd explain ho	ow they furth	er the org	anızatıon's ex	empt purp	ose in Part	
	XIII										
5	_	•	rganization solic						ılar		
_			funds rather tha			of the organ	nization's (collection?			Yes No
ra			d Custodial			to Form O	00 Dos	11/ has 0	07.1000	rted an amount	an Form
_		990, Part X,	line 21							nted an amount	
1a	_	_	ent, trustee, cust	todian or other	intermediary	y for contribi	utions or o	ther assets n	ot		
		n Form 990, Pa									Yes No
D	if "Yes," ex	plain the arran	gement in Part 2	XIII and comple	ete the follow	ving table.					Amount
_	Qogrania	balanco								1c	Allount
c d	Beginning	during the year								1d	
u		ns during the year	ear							18	
f	Ending bal	•	Ju .							1f	
	-		de an amount o	n Form 990, P	art X, line 21	2					Yes No
		125 O.S.S.	gement in Part				been prov	ided in Part X	30		
Pa	-	Endowmen									
		Complete if	the organiza	ition answe	red "Yes"	to Form 9	90, Par	t IV, line 10)		
				(a) Cum	ent year	(b) Pro	x year	(c) Two yes	ırs back	(d) Three years back	(e) Four years back
1a	Beginning	of year balance	€								
	Contributio										
С		ment earnings,	gains, and		Į.						
	losses					_					
a		scholarships	autton and								
9	programs	enditures for fac	Cilities and	N.							N.
f	. •	itive expenses									
g	End of year										
2	•		rcentage of the	current year er	id balance (l	ine 1g, colu	mn (a)) he	eld as		311	
а	Board des	ignated or quas	si-endowment	•	%						
þ	Permanen	t endowment 🕨	•	%							
C		ly restricted en			%						
			2a, 2b, and 2c s								
3a			ids not in the po	ssession of the	e organizatio	n that are h	eld and ad	Iministered to	rlhe		Yes No
	organizatio	-									3a(i)
	• •	ited organizatio									3a(li)
h		d organizations	elated organizat	tione listed as i	equired on S	Schedule R3	,				3b
4			ntended uses of								
Pa	rt VI	THE R. P. LEWIS CO., LANSING, MICH.	dings, and E								
		Complete if	the organiza	ation answe	red "Yes"	to Form 9	90, Par	t IV, line 1	1a See	Form 990, Part	X, line 10.
		Description of pro	орепу	(4)	Cost or other be	9815	(b) Cost or	other basis	(c)	Accumulated	(d) Book value
					(investment)		(oth	er)	d	epreciation	
1a	Land										
	Buildings										
		I improvements	}	7							
	Equipmen	l						29,954		26,492	3,462
	Other L Add lines	1a through 1e	(Column (d) mu	ust equal Form	990, Part X.	, column (B)	, line 10(c			D	3,462

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶			
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnot	te to the organization's final	ncial statements that reports the	
organization's liability for uncertain tax positions under FIN 48 (ASC 740) Chec	k here if the text of the foot	note has been provided in Part XIII	
DATE OF THE PARTY		Schodule D./	Form 991

(6)(7) (8) (9)

Sche	dule D (Form 990) 2013 LITTLE LEAGUE BASEBALL, INC.	76-0361979	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenue per Retu	irn.
	'Complete if the organization answered "Yes" to Form 990, P	art 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		
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
C	Recovenes of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	1
0	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		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
þ	Other (Describe in Part XIII)	4b	4
C	Add lines 4a and 4b	4	4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5
Pa	rt XII Reconciliation of Expenses per Audited Financial Stater		eturn.
	Complete if the organization answered "Yes" to Form 990, P	art 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	7 1	
а	Donated services and use of facilities	2a	4
b	Prior year adjustments	2b	
C	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
0	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1	r 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		1
а	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
Pa	rt 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

Schedule D (Form 990) 2013 LITTLE LEAGUE BASEBALL, INC.

76-0361979

Page 5

Part XIII Supplemental Information (continued)

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

LITTLE LEAGUE BASEBALL, INC.

Employer Identification number 76-0361979

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
THE ORGANIZATION'S PRESIDENT AND TREASURER REVIEW THE FORM 990 BEFORE
FILING. ANY OTHER MEMBER MAY REVIEW THE FORM 990 UPON REQUEST.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation GOVERNING DOCUMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC.

Form 990, Part IX, Line 11g - Other Fees for Services
Description

	Program	Service	Mgt & General		Fundraising		
BASEBALL	SUPPLIES						
	\$	21,358	\$	0	\$	0	
UNIFORMS							
	\$	19,192	\$	0	\$	0	
NATIONAL	AND ASSOC	DUES					
	\$	5,509	\$	0	\$	0	

Form 4562

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return

OMB No 1545-0172

See separate instructions. identifying number Name(s) shown on return 76-0361979 LITTLE LEAGUE BASEBALL, INC. Business or activity to which this form relates Indirect Depreciation Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 500,000 Maximum amount (see instructions) 1 Total cost of section 179 property placed in service (see instructions) 2 2 2,000,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (c) Elected cost (b) Cost (business use only) (a) Description of property 7 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 ▶ 13 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 15 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property) (See instructions) Part III Section A 2.159 MACRS deductions for assets placed in service in tax years beginning before 2013 17 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use (b) Month and year (d) Recovery (g) Depreciation deduction (e) Convention (f) Melhod placed in (a) Classification of property period only-see instructions) 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property 20-year property S/L 25 yrs g 25-year property S/L MM 27 5 yrs h Residential rental MM 27 5 yrs S/L property MM Nonresidential real 39 yrs S/L MM property Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/L MM S/L 40 yrs c 40-year

portion of the basis attributable to section 263A costs For Paperwork Reduction Act Notice, see separate instructions.

Summary (See instructions.)

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here

and on the appropriate lines of your return. Partnerships and S corporations—see instructions

For assets shown above and placed in service during the current year, enter the

Listed property Enter amount from line 28

Form 4562 (2013)

2,159

21

22

21

Part IV