

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0047

2019

For calendar year 2019 or other tax year beginning OCT 1, 2019, and ending SEP 30, 2020

Go to www.irs.gov/Form990T for instructions and the latest information

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service

Header section containing organization name (LITTLE LEAGUE BASEBALL, INCORPORATED), address (P.O. BOX 3485, WILLIAMSPORT, PA 17701), and identification numbers.

Section C: Book value of all assets at end of year (100,447,902) and Group exemption number (3158).

Section H: Enter the number of the organization's unrelated trades or businesses (3) and describe the only (or first) unrelated trade or business here (GIFT SHOP SALES).

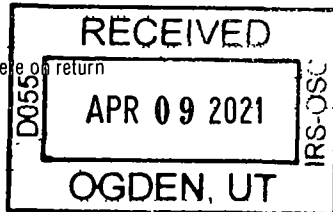
Section I: During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? (No)

Section J: The books are in care of DAVID B. HOUSEKNECHT, CFO. Telephone number (570) 326-1921.

Table for Part I: Unrelated Trade or Business Income. Columns include (A) Income, (B) Expenses, and (C) Net. Rows include Gross receipts or sales (115,604), Cost of goods sold (48,554), and Total (67,050).

Part II: Deductions Not Taken Elsewhere (See instructions for limitations on deductions)

Table for Part II: Deductions Not Taken Elsewhere. Rows include Compensation of officers, directors, and trustees (78,696), Depreciation (30,150), and Total deductions (225,986).



SEE STATEMENT 1

SEE STATEMENT 2

SCANNED JAN 11 2022

Handwritten initials 'OH' at the bottom right of the page.

Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Includes lines 32-39 for unrelated business taxable income calculation.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 40-45 for tax computation.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 46-56 for tax and payments.

Part VI Statements Regarding Certain Activities and Other Information

Table with 3 columns: Question number, Question text, and Yes/No response. Includes questions 57-59.

Sign Here

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 taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer: David Houchens, Date: 3/17/2021, Title: CFO

May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [] No

Table with 4 columns: Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN, Firm's name, Firm's EIN, Firm's address, Phone no.

Schedule A - Cost of Goods Sold. Enter method of inventory valuation **N/A**

| | | | | | | | |
|----|---|----|---------|---|---|-----|-------------------------------------|
| 1 | Inventory at beginning of year | 1 | 0. | 6 | Inventory at end of year | 6 | 0. |
| 2 | Purchases | 2 | 48,554. | 7 | Cost of goods sold Subtract line 6 from line 5 Enter here and in Part I, line 2 | 7 | 48,554. |
| 3 | Cost of labor | 3 | | | | Yes | No |
| 4a | Additional section 263A costs (attach schedule) | 4a | | | | | |
| 4b | Other costs (attach schedule) | 4b | | | | | |
| 5 | Total Add lines 1 through 4b | 5 | 48,554. | | | | <input checked="" type="checkbox"/> |

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

| | | |
|---|---|---|
| 1 Description of property | | |
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| 2 Rent received or accrued | | 3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule) |
| (a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) | (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) | |
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| Total | 0. | Total 0. |
| (c) Total income Add totals of columns 2(a) and 2(b) Enter here and on page 1, Part I, line 6, column (A) | | (b) Total deductions Enter here and on page 1, Part I, line 6, column (B) |
| | | 0. |

Schedule E - Unrelated Debt-Financed Income (see instructions)

| | | | | |
|--|--|--|---|--|
| 1 Description of debt-financed property | | 2 Gross income from or allocable to debt-financed property | 3 Deductions directly connected with or allocable to debt-financed property | |
| | | | (a) Straight line depreciation (attach schedule) | (b) Other deductions (attach schedule) |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| 4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | 5 Average adjusted basis of or allocable to debt-financed property (attach schedule) | 6 Column 4 divided by column 5 | 7 Gross income reportable (column 2 x column 6) | 8 Allocable deductions (column 6 x total of columns 3(a) and 3(b)) |
| (1) | | % | | |
| (2) | | % | | |
| (3) | | % | | |
| (4) | | % | | |
| Totals | | | Enter here and on page 1, Part I, line 7, column (A) | Enter here and on page 1, Part I, line 7, column (B) |
| | | | 0. | 0. |
| Total dividends-received deductions included in column 8 | | | | 0. |

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

| 1 Name of controlled organization | 2 Employer identification number | Exempt Controlled Organizations | | | |
|------------------------------------|--|--|---|--|---|
| | | 3 Net unrelated income (loss) (see instructions) | 4 Total of specified payments made | 5 Part of column 4 that is included in the controlling organization's gross income | 6 Deductions directly connected with income in column 5 |
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| Nonexempt Controlled Organizations | | | | | |
| 7 Taxable income | 8 Net unrelated income (loss) (see instructions) | 9 Total of specified payments made | 10 Part of column 9 that is included in the controlling organization's gross income | 11 Deductions directly connected with income in column 10 | |
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| | | | Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A) | Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B) | |
| Totals | | | 0. | 0. | |

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

| 1 Description of income | 2 Amount of income | 3 Deductions directly connected (attach schedule) | 4 Set-asides (attach schedule) | 5 Total deductions and set-asides (col 3 plus col 4) |
|-------------------------|--------------------|---|--------------------------------|---|
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| | | Enter here and on page 1, Part I, line 9, column (A) | | Enter here and on page 1, Part I, line 9, column (B) |
| Totals | | 0. | | 0. |

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

| 1 Description of exploited activity | 2 Gross unrelated business income from trade or business | 3 Expenses directly connected with production of unrelated business income | 4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain compute cols 5 through 7 | 5 Gross income from activity that is not unrelated business income | 6 Expenses attributable to column 5 | 7 Excess exempt expenses (column 6 minus column 5 but not more than column 4) |
|-------------------------------------|--|--|---|--|-------------------------------------|---|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| | Enter here and on page 1 Part I, line 10 col (A) | Enter here and on page 1 Part I, line 10 col (B) | | | | Enter here and on page 1, Part II, line 25 |
| Totals | 0. | 0. | | | | 0. |

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

| 1 Name of periodical | 2 Gross advertising income | 3 Direct advertising costs | 4 Advertising gain or (loss) (col 2 minus col 3) If a gain compute cols 5 through 7 | 5 Circulation income | 6 Readership costs | 7 Excess readership costs (column 6 minus column 5, but not more than column 4) |
|--|----------------------------|----------------------------|---|----------------------|--------------------|---|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals (carry to Part II, line (5)) | 0. | 0. | | | | 0. |

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

| 1 Name of periodical | 2 Gross advertising income | 3 Direct advertising costs | 4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 | 5 Circulation income | 6 Readership costs | 7 Excess readership costs (column 6 minus column 5, but not more than column 4) |
|------------------------------------|--|--|--|----------------------|--------------------|---|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals from Part I | 0. | 0. | | | | 0. |
| Totals, Part II (lines 1-5) | 0. <small>Enter here and on page 1, Part I, line 11, col (A)</small> | 0. <small>Enter here and on page 1, Part I, line 11, col (B)</small> | | | | 0. <small>Enter here and on page 1, Part II, line 26</small> |

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

| 1 Name | 2 Title | 3 Percent of time devoted to business | 4 Compensation attributable to unrelated business |
|---|---------|---------------------------------------|---|
| (1) | | % | |
| (2) | | % | |
| (3) | | % | |
| (4) | | % | |
| Total Enter here and on page 1, Part II, line 14 | | | 0. |

| FORM 990-T | OTHER DEDUCTIONS | STATEMENT 1 |
|--------------------------------------|------------------|-------------|
| DESCRIPTION | | AMOUNT |
| POSTAGE/SHIPPING | | 19,347. |
| OFFICE SUPPLIES | | 20,844. |
| UTILITIES | | 28,126. |
| INSURANCE | | 13,410. |
| TOTAL TO FORM 990-T, PAGE 1, LINE 27 | | 81,727. |

| FORM 990-T | NET OPERATING LOSS DEDUCTION | | | STATEMENT 2 |
|-----------------------------------|------------------------------|-------------------------|----------------|---------------------|
| TAX YEAR | LOSS SUSTAINED | LOSS PREVIOUSLY APPLIED | LOSS REMAINING | AVAILABLE THIS YEAR |
| 09/30/19 | 41,078. | 0. | 41,078. | 41,078. |
| NOL CARRYOVER AVAILABLE THIS YEAR | | | 41,078. | 41,078. |

| FORM 990-T | NET OPERATING LOSS DEDUCTION | | | STATEMENT 3 |
|-----------------------------------|------------------------------|-------------------------|----------------|---------------------|
| TAX YEAR | LOSS SUSTAINED | LOSS PREVIOUSLY APPLIED | LOSS REMAINING | AVAILABLE THIS YEAR |
| 09/30/01 | 104,307. | 0. | 104,307. | 104,307. |
| 09/30/02 | 90,865. | 0. | 90,865. | 90,865. |
| 09/30/03 | 17,089. | 0. | 17,089. | 17,089. |
| 09/30/04 | 32,641. | 0. | 32,641. | 32,641. |
| 09/30/05 | 91,092. | 0. | 91,092. | 91,092. |
| 09/30/06 | 135,312. | 0. | 135,312. | 135,312. |
| 09/30/07 | 143,445. | 0. | 143,445. | 143,445. |
| 09/30/08 | 214,016. | 0. | 214,016. | 214,016. |
| 09/30/09 | 187,663. | 0. | 187,663. | 187,663. |
| 09/30/10 | 245,015. | 0. | 245,015. | 245,015. |
| 09/30/11 | 262,489. | 0. | 262,489. | 262,489. |
| 09/30/12 | 180,899. | 0. | 180,899. | 180,899. |
| 09/30/13 | 133,467. | 0. | 133,467. | 133,467. |
| 09/30/14 | 33,889. | 0. | 33,889. | 33,889. |
| 09/30/15 | 139,274. | 0. | 139,274. | 139,274. |
| 09/30/16 | 59,223. | 0. | 59,223. | 59,223. |
| 09/30/17 | 67,284. | 0. | 67,284. | 67,284. |
| 09/30/18 | 92,264. | 0. | 92,264. | 92,264. |
| NOL CARRYOVER AVAILABLE THIS YEAR | | | 2,230,234. | 2,230,234. |

**SCHEDULE M
(Form 990-T)**

**Unrelated Business Taxable Income from an
Unrelated Trade or Business**

ENTITY 2

OMB No 1545-0047

2019

For calendar year 2019 or other tax year beginning OCT 1, 2019 and ending SEP 30, 2020

Department of the Treasury
Internal Revenue Service

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▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for
501(c)(3) Organizations Only

Name of the organization **LITTLE LEAGUE BASEBALL, INCORPORATED** Employer identification number **23-1688231**

Unrelated Business Activity Code (see instructions) ▶ **541800**

Describe the unrelated trade or business ▶ **EQUIPMENT & SUPPLIES CATALOG**

| Part I Unrelated Trade or Business Income | | (A) Income | (B) Expenses | (C) Net |
|--|--------------------|-------------------|----------------|-----------------|
| 1 a Gross receipts or sales | | | | |
| b Less returns and allowances | c Balance ▶ | 1c | | |
| 2 Cost of goods sold (Schedule A, line 7) | | 2 | | |
| 3 Gross profit Subtract line 2 from line 1c | | 3 | | |
| 4 a Capital gain net income (attach Schedule D) | | 4a | | |
| b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) | | 4b | | |
| c Capital loss deduction for trusts | | 4c | | |
| 5 Income (loss) from a partnership or an S corporation (attach statement) | | 5 | | |
| 6 Rent income (Schedule C) | | 6 | | |
| 7 Unrelated debt-financed income (Schedule E) | | 7 | | |
| 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) | | 8 | | |
| 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) | | 9 | | |
| 10 Exploited exempt activity income (Schedule I) | | 10 | | |
| 11 Advertising income (Schedule J) | | 11 34,580. | 90,661. | -56,081. |
| 12 Other income (See instructions, attach schedule) | | 12 | | |
| 13 Total. Combine lines 3 through 12 | | 13 34,580. | 90,661. | -56,081. |

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income)

| | | | | |
|--|------------|-----------|------------|-----------------|
| 14 Compensation of officers, directors, and trustees (Schedule K) | | 14 | | |
| 15 Salaries and wages | | 15 | | |
| 16 Repairs and maintenance | | 16 | | |
| 17 Bad debts | | 17 | | |
| 18 Interest (attach schedule) (see instructions) | | 18 | | |
| 19 Taxes and licenses | | 19 | | |
| 20 Depreciation (attach Form 4562) | 20 | | | |
| 21 Less depreciation claimed on Schedule A and elsewhere on return | 21a | | 21b | |
| 22 Depletion | | 22 | | |
| 23 Contributions to deferred compensation plans | | 23 | | |
| 24 Employee benefit programs | | 24 | | |
| 25 Excess exempt expenses (Schedule I) | | 25 | | |
| 26 Excess readership costs (Schedule J) | | 26 | | |
| 27 Other deductions (attach schedule) | | 27 | | |
| 28 Total deductions. Add lines 14 through 27 | | 28 | | 0. |
| 29 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 | | 29 | | -56,081. |
| 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) | | 30 | | 0. |
| 31 Unrelated business taxable income Subtract line 30 from line 29 | | 31 | | -56,081. |

STMT 4

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

| SCHEDULE M | | NET OPERATING LOSS DEDUCTION | | STATEMENT 4 |
|-----------------------------------|----------------|------------------------------|----------------|---------------------|
| TAX YEAR | LOSS SUSTAINED | LOSS PREVIOUSLY APPLIED | LOSS REMAINING | AVAILABLE THIS YEAR |
| 09/30/19 | 59,744. | | 59,744. | 59,744. |
| NOL CARRYOVER AVAILABLE THIS YEAR | | | 59,744. | 59,744. |

LITTLE LEAGUE BASEBALL, INCORPORATED
 Schedule J - Advertising Income (see instructions)

ENTITY 2
 23-1688231

Part I Income From Periodicals Reported on a Consolidated Basis

| 1 Name of periodical | 2 Gross advertising income | 3 Direct advertising costs | 4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 | 5 Circulation income | 6 Readership costs | 7 Excess readership costs (column 6 minus column 5, but not more than column 4) |
|-------------------------------------|----------------------------|----------------------------|--|----------------------|--------------------|---|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals (carry to Part II, line (5)) | 0. | 0. | | | | 0. |

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

| 1 Name of periodical | 2 Gross advertising income | 3 Direct advertising costs | 4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 | 5 Circulation income | 6 Readership costs | 7 Excess readership costs (column 6 minus column 5, but not more than column 4) |
|-----------------------------|----------------------------|----------------------------|--|----------------------|--------------------|---|
| (1) EQUIPMENT & | | | | | | |
| (2) SUPPLIES CATALOG | 34,580. | 90,661. | -56,081. | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals from Part I | 0. | 0. | | | | 0. |
| Totals, Part II (lines 1-5) | 34,580. | 90,661. | | | | 0. |

SCHEDULE M
(Form 990-T)

Unrelated Business Taxable Income from an
Unrelated Trade or Business

ENTITY **3**

OMB No 1545-0047

2019

For calendar year 2019 or other tax year beginning OCT 1, 2019 and ending SEP 30, 2020

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Department of the Treasury
Internal Revenue Service

Open to Public Inspection for
501(c)(3) Organizations Only

Name of the organization **LITTLE LEAGUE BASEBALL, INCORPORATED** Employer identification number **23-1688231**

Unrelated Business Activity Code (see instructions) ▶ **541800**

Describe the unrelated trade or business ▶ **WORLD SERIES PROGRAM ADVERTISING**

| Part I Unrelated Trade or Business Income | | (A) Income | (B) Expenses | (C) Net |
|--|-----------|------------|--------------|---------|
| 1 a Gross receipts or sales | | | | |
| b Less returns and allowances | | | | |
| c Balance ▶ | 1c | | | |
| 2 Cost of goods sold (Schedule A, line 7) | 2 | | | |
| 3 Gross profit Subtract line 2 from line 1c | 3 | | | |
| 4 a Capital gain net income (attach Schedule D) | 4a | | | |
| b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) | 4b | | | |
| c Capital loss deduction for trusts | 4c | | | |
| 5 Income (loss) from a partnership or an S corporation (attach statement) | 5 | | | |
| 6 Rent income (Schedule C) | 6 | | | |
| 7 Unrelated debt-financed income (Schedule E) | 7 | | | |
| 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) | 8 | | | |
| 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) | 9 | | | |
| 10 Exploited exempt activity income (Schedule I) | 10 | | | |
| 11 Advertising income (Schedule J) | 11 | | | |
| 12 Other income (See instructions, attach schedule) | 12 | | | |
| 13 Total. Combine lines 3 through 12 | 13 | 0. | | |

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income.)

| | | |
|--|------------|------------|
| 14 Compensation of officers, directors, and trustees (Schedule K) | 14 | |
| 15 Salaries and wages | 15 | |
| 16 Repairs and maintenance | 16 | |
| 17 Bad debts | 17 | |
| 18 Interest (attach schedule) (see instructions) | 18 | |
| 19 Taxes and licenses | 19 | |
| 20 Depreciation (attach Form 4562) | 20 | |
| 21 Less depreciation claimed on Schedule A and elsewhere on return | 21a | 21b |
| 22 Depletion | 22 | |
| 23 Contributions to deferred compensation plans | 23 | |
| 24 Employee benefit programs | 24 | |
| 25 Excess exempt expenses (Schedule I) | 25 | |
| 26 Excess readership costs (Schedule J) | 26 | |
| 27 Other deductions (attach schedule) | 27 | |
| 28 Total deductions. Add lines 14 through 27 | 28 | 0. |
| 29 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 | 29 | 0. |
| 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) | 30 | 0. |
| 31 Unrelated business taxable income Subtract line 30 from line 29 | 31 | |

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019