_{Egrm} 990-T	Exempt Organization Bu	sine	ess Income T	ax Return		OMB No 1545-0047
	For celendar year 2019 or other tax year beginning OCT 1			P 30, 202	'n	2010:
	For calendar year 2019 or other tax year beginning OCT I				<u> </u>	2013
Department of the Treasury Internal Revenue Service	Do not enter SSN numbers on this form as it may				ŀ	Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if address changed	Name of organization (,Check box if name			<u> </u>	(Emp	loyer identification number · · · · · · · · · · · · · · · · · · ·
B Exempt under section	Print LITTLE LEAGUE BASEBALI	. I	NCORPORATED		2	3-1688231
X 501(d)(3)	or Number, street, and room or suite no. If a P.O. b					lated business activity code
408(e) 220(e)	Type P.O. BOX 3485				, , , ,	
408A 530(a)	City or town, state or province, country, and ZIP WILLIAMSPORT, PA 1770		n postal code		453	220:
C Book value of all assets at end of year	F Group exemption number (See instructions)	>	3158			
100,447,9	02. G Check organization type 🕨 🗶 501(c) cc	rporatio	n 501(c) trust	401(a)	trust	Other trust
	organization's unrelated trades or businesses	3	Describe	the only (or first) un	related	
	GIFT SHOP SALES			, complete Parts I-V		
describe the first in the t	lank space at the end of the previous sentence, complete F	Parts I ar	nd II, complete a Schedule	M for each addition	al trade	e or
business, then complete						
	the corporation a subsidiary in an affiliated group or a par	ent-subs	idiary controlled group?	▶ L	Ye	es X No
	nd identifying number of the parent corporation	150	Talaah		F70	V 226 1021
	DAVID B. HOUSEKNECHT, (Trade or Business Income	FO	(A) Income	one number (8) Expenses	570) 326-1921 (C) Net
	115 604		(A) ilicolite	(b) Expenses		(C) Net
1a Gross receipts or sal			115,604.			
b Less returns and allo		1c 2	48,554.	 		1.02 1.1 ANIA
2 Cost of goods sold (\$3 Gross profit Subtrac		3	67,050.			67.050
•	e (attach Schedule D)	4a	5,,0301			0,,030.
	4797, Part II, line 17) (attach Form 4797)	4b				
c Capital loss deduction	•	4c				
•	partnership or an S corporation (attach statement)	5			•	
6 Rent income (Schedu		6				
7 Unrelated debt-finance	ed income (Schedule E)	7				,
8 Interest, annuities, ro	alties, and rents from a controlled organization (Schedule F	8				An
9 Investment income o	a section 501(c)(7), (9), or (17) organization (Schedule G) 9_				
10 Exploited exempt acti	rity income (Schedule I)	10/				, -
11 Advertising income (·	/11_				
- •	tructions; attach schedule)	12_	5 7 6 7			<u> </u>
13 Total. Combine lines		13	67,050.			67,050.
(Deductions	ns Not Taken Elsewhere (See instructions must be directly connected with the unrelated business.)				·	· · · · · · · · · · · · · · · · · · ·
	cers, directors, and trustees (Schedule 🙌				14	70 606
15 Salaries and wages					15	78,696.
16 Repairs and mainter	ance				16	
17 Bad debts18 Interest (attach sche	dule) (see instructions)				17 18	
19 Taxes and licenses	dule) (see Ilisti uctions)				19	
20 Depreciation (attach	Form 4562) RECEIV	/FD	20	30,150.	13	
		340. J.A.	219	3072301	21b	30,150.
22 Depletion	rred compensation plans	0004	88-080		22	
23 Contributions to defe	rred compensation plans APR 09	ZUZI	131		23	
24 Employee benefit pro	/ I· 1		 Ğ		24	35,413.
25 Excess exempt expe		UT	j		25	
26 Excess readership co				•	26	
27 Other deductions (at	· /		SEE STAT	EMENT 1	27	81,727.
28 Total deductions A	glines 14 through 27			{	28	225,986.
	xable income before net operating loss deduction. Subtra				29	-158,936.
,	rating loss arising in tax years beginning on or after Janu	ary 1, 20				
(see instructions)			SEE STAT	EMENT 2	30	0.
	xable income Subtract line 30 from line 29				31	<u>-158,936.</u>
923701 01-27-20 LHA FO	Paperwork Reduction Act Notice, see instructions					Form 990-T (2019)

Form 99	0-T (2019	LITTLE LEAGUE BASEBALL, INCORPORATED			23-	16882	31 Pag	је 2
Part	וען	Total Unrelated Business Taxable Income						
~32 ₺	Total o	unrelated business taxable income computed from all unrelated trades or businesses (see instructi	ons)	L	32		C) .
33	Amouf	its paid for disallowed fringes			33			
34		able contributions (see instructions for limitation rules)		ſ	34		Ö)
35		inrelated business taxable income before pre 2018 NOLs and specific deduction Subtract line 34 from t	he sum of lines 32 and 3	3	35			_
36		tion for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	STMT 3		36		- 0) ;
37		of unrelated business taxable income before specific deduction. Subtract line 36 from line 35		Ī	37			• • •
38		c deduction (Generally \$1,000, but see line 38 instructions for exceptions)		んし	28	·· · · · · · · · · · · · · · · · · · ·	,000	<u>,</u>
		ted business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37, —	'	ひけ	-	· -	·	<u> </u>
- 39		he smaller of zero or line 37			39		0	٠. (
Dord		Tax Computation	· · · · · · · · · · · · · · · · · · ·		39 [•
40	-	zations Taxable as Corporations Multiply line 39 by 21% (0 21)		╸┟	40			•
41		Taxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 39	trom .	. }-			_	_
		ax rate schedule or Schedule D (Form 1041)		▶	41			
42	-	tax See instructions		▶	42		· — ·	
43	Alterna	ative minimum tax (trusts only)		Ļ	43			_
44	Tax on	Noncompliant Facility Income See instructions		 -	44			
45		Add lines 42, 43, and 44 to line 40 or 41, whichever applies	-		45		0	٠.
Part	V	Tax and Payments	<u> </u>					_
46 a	Foreign	n tax credit (corporations attach Form 1118, trusts attach Form 1116) 46a					~ .	٠
b	Other o	credits (see instructions) 46b						-
С	Genera	I business credit Attach Form 3800 46c			1			••
î d	Credit	for prior year minimum tax (attach Form 8801 or 8827)				•	, , ,	•••
		redits Add lines 46a through 46d			46e			•
47		ct line 46e from line 45			47		Ō	•
48		axes Check if from Form 4255 Form 8611 Form 8697 Form 8866	Other (attach schedul	(e)	48		•	_
49		ax Add lines 47 and 48 (see instructions)	J 011101 (411041100111011	~ -	49		0	
50		et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3		_ F	50			1:
		nts A 2018 overpayment credited to 2019		r	-30	···		÷
	-	· ·		\dashv	-			
	•	, , , , , , , , , , , , , , , , , , ,		\dashv				
	•	posited with Form 8868 51c		{⋅	• [1		
	-	n organizations. Tax paid or withheld at source (see instructions)			l			
	_ `	withholding (see instructions) 51e			[•
		for small employer health insurance premiums (attach Form 8941)			ŀ			
g		redits, adjustments, and payments Form 2439			`	, . . ,		
		orm 4136 Other Total ▶ _51g 			_			
	•	ayments Add lines 51a through 51g		L	52			
53	Estimat	ted tax penalty (see instructions). Check if Form 2220 is attached.		Ļ	53		· · · · · · · · · · · · · · · · · · ·	<u>:</u>
54	Tax du	e If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	l	▶ L	54			
55	Overpa	yment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid)	▶	55			
56		ne amount of line 55 you want: Credited to 2020 estimated tax	Refunded	▶ [56			E 4
Part	VI :	Statements Regarding Certain Activities and Other Information (see	instructions)					
57	At any	time during the 2019 calendar year, did the organization have an interest in or a signature or other au	ithority			Y	es No	 0
	over a f	financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have	to file					_
	FinCEN	Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign cou	untrv					
		► POLAND	,			5	x	
		the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to	a foreign trust?			—- -	X	_
	-	see instructions for other forms the organization may have to file	, a foreign trast.			- -	. -	
		ie amount of tax-exempt interest received or accrued during the tax year \$				1	. .	~
- 33		nder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements a	and to the best of my know	wledos	and helie	f it is true		_
Sign	co	peract, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any k	nowledge	wiedge	rand bene	1, 10 10 10 10		
Here		No. 1 150-111 0 11 4 1 3/17/2001 N CERO				scuss this reti		٦
		Signature of officer Date Title				own below (s		ı
		Signature of officer Date / Title		ınstr	ctions)?	X Yes	N (<u></u>
		Print/Type preparer's name Preparer's signature Date	Check	ıf	PTIN			
Paid		Jamy Let 3/11/21	self- employ	ed			•	
Prep		DAIME L. KUNTZ, CPA				27271		
Use		Firm's name ▶ BAKER TILLY US, LLP	Firm's EIN	•	39-	08599	10	· -
- 30	· · · · · ·	1000 COMMERCE PARK DR.						
		Firm's address ► WILLIAMSPORT, PA 17701	Phone no	57	0.32	3.602	23	

Page 3

Schedule A - Cost of Good	s Sold. Ente	r method of inven	tory v	aluation N/A				-
1 Inventory at beginning of year	1	0.	6	Inventory at end of year	ar		6	0.
2 Purchases	2	48,554.] 7	Cost of goods sold S	ubtract	line 6		
3 Cost of labor	3]	from line 5. Enter here	and in	Part I,		-
4a Additional section 263A costs				line 2			7	48,554.
(attach schedule)	4a		8	Do the rules of section	1 263A (with respect to		Yes No
, b Other costs (attach schedule)	4b	·		property produced or	acquired	for resale) apply to		
5 Total Add lines 1 through 4b	5	48,554.		the organization?				,X.
Schedule C - Rent Income	(From Real	Property and	Per	sonal Property L	.ease	d With Real Prop	erty)	•
(see instructions)							-	
1 Description of property								
`(1)							-	
(2)								`
(3)								
(4)								# 1 TEN=~
	2 Rent receiv	ed or accrued				0/		
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	ə than	' of rent for p	ersonai	onal property (if the percente property exceeds 50% or if ed on profit or income)	ige	3(a) Deductions directly columns 2(a) a		ittach schedule) - ' '
(1)								,
(2)					-			·
(3)								
(4)								
Total	0.	Total			0.			× 12
(c) Total income Add totals of columns here and on page 1, Part I, line 6, column	n (A)				0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	>	0.
Schedule E - Unrelated Det	ot-Financed	Income (see	nstru	ctions)				
			2	Gross income from		3 Deductions directly conto debt-finance	nected w	orth or allocable arty
1 Description of debt-fit	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)
(1)		<u> </u>			.		+	
(2)		·				- ,· , , =	1	
(3)		<u> </u>				<u></u>		
(4)						 		
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property h schedule)	6	Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)	(0	8 Allocable deductions column 6 x total of columns 3(a) and 3(b))
(1)				%			\vdash	
(2)				%				
(3)				%				
(4)				%				
						nter here and on page 1, Part I, line 7, column (A)		nter here and on page 1, Part I line 7, column (B)
Totals				•		0	.	0.
Total dividends-received deductions in	ncluded in column	n 8		_		<u> </u>	-	0.

23-1688231

Form 990-T (2019)

Form 990-T (2019) LITTLE LEAGUE BASEBALL, INCORPORATED

23-168823

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)	1						
(4)							
Totals from Part I		0.	0.	_			0.
	•	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)	,	•		Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1-5)	•	0.	0.			<u>.</u>	0.

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** (2019)

FORM 990-1	1	OTHER DEDUC	TIONS	STATEMENT 1
DESCRIPTION	М			AMOUNT
POSTAGE/SH OFFICE SUP UTILITIES INSURANCE				19,347. 20,844. 28,126. 13,410.
TOTAL TO F	ORM 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 CARRYO	VER AVAILABLE THIS	YEAR	41,078.	41,078.
•				

FORM 990-T	NET	OPERATING LOSS D	EDUCTION	STATEMENT 3
ŢAX 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 CARRYOV	ER AVAILABLE THIS	YEAR	2,230,234.	2,230,234.

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► 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

Name	of the organization LITTLE LEAGUE BASEBALL,	TN	CORPORATED		Employer ide		
	Unrelated Business Activity Code (see instructions) - 54180						
	Describe the unrelated trade or business EQUIPMENT	<u>.</u>	SUPPLIES C	ATAL	OG		
Pa			(A) Income		(B) Expense	s	(C) Net
1 a	Gross receipts or sales						4
þ	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				-	-4 14, 514
. b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b					
С	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			ļ		- 1	
	organization (Schedule F)	8					1 - 1
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	34,58	0.	90,6	61.	-56,081
12	Other income (See instructions, attach schedule)	12					
13	Total. Combine lines 3 through 12	13	34,58	0.	90,6	61.	-56,081:
Date	t Deductions Not Taken Elsewhere (See instructi	ons i	or limitations on	deduc	tions) (Dec	ductio	ne must he
Fai	directly connected with the unrelated business in			acaac	7.110113) (DCC	auctio	no must be
							, a
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 deductions.	tion S	Subtract line 28 from	line 13		29	-56,081.
30	Deduction for net operating loss arising in tax years beginning on or					 ~~	
50	instructions)	untel	55.104.7 1, 2010 (See	•	STMT 4	30	0.
31	Unrelated business taxable income Subtract line 30 from line 29					31	-56,081.
	For Paperwork Reduction Act Notice, see instructions.			-	9,		M (Form 990-T) 2019
	i or i aportroit riculation not folice, see manuclions.				30	, i e dule	(1 01111 030-1) 2013

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 CARRYO	VER AV	AILABLE THIS	YEAR	59,744.	59,744:

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

1	Dart I	Income	From D	priodicale	Panorted	on a	Consolidated Ba	eie
- 1	Lairi.	Inicome	TOILE	er iouicais	neported	OII a	Consolidated De	313

1 Name of periodical	2 Gross advertising	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute :	5 Circulation	6 Readership costs	7 Excess reader ship costs (column 6 minus column 5, but not more
1 Walle of periodical	income	Bovertising costs	cols 5 through 7	ncome	Costs	than column 4)
(1)						***
(2)] . [-	<u> </u>	
(3)] [• .
(4)						
Fotals (carry to Part II, line (5))	0.	0.]			0.
Part II Income From Period			ate Basis (For ear	ch periodical lister	d in Part II. fill in	
columns 2 through 7 on a			,			
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 5 minus column 5, but not more than column 4)
(1) EQUIPMENT &						
(6)	34,580.	90,661.	-56,081.			
(2) SUPPLIES CATALOG	34,300.	20,001.	30,001.			
(3) SUPPLIES CATALOG	34,300.	J0,001.	30,001.			
(3)	34,300.	70,001.	30,001.			
(3)	0.	0.	30,0011			0.
			30,001.			Enter here and on page 1, Part II, line 27

Employer Identification number

3

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No 1545-0047

Department of the Treasury

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.

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

501(c)(3) Organizations Only

	LITTLE LEAGUE BASEBALL,	INC	CORPORATED	23-16882	31
·	Unrelated Business Activity Code (see instructions) > 54180		<u> </u>		
	Describe the unrelated trade or business WORLD SER	IES	PROGRAM ADVE	RTISING	* .
Pa	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales				• ,
, p	Less returns and allowances c Balance	1c			<u> </u>
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit Subtract line 2 from line 1c	3			4
4 a	Capital gain net income (attach Schedule D)	4a		,	
, b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
С	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		<u></u>	
<u>13</u>	Total. Combine lines 3 through 12	13	0.	l	
Par	Deductions Not Taken Elsewhere (See instruction directly connected with the unrelated business income			uctions) (Deductio	ns must be
14	Compensation of officers, directors, and trustees (Schedule K)			14	-1-
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	<u></u>
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			3 29	0.
30	Deduction for net operating loss arising in tax years beginning on or	r 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	e M (Form 990-T) 2019