

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



832001 12-18-08

EXTENSION GRANTED TO AUGUST 16, 2010

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Inspection

A F	or th	e 2008 calendar year, or tax year beginning $$ OCT 1 , $$ 2008 $$ and er	nding S	EP 30, 2009	
В	Check if ipplicab	le Please use IRS C Name of organization		D Employer identific	ation number
	Addre				
	Name chang	type			318342
L	instral_ return	Specific '	oom/suite	E Telephone number	
Ļ	Terms ation			330-7	758-2123
L	Amen return	City or town, state or country, and ZIP + 4		G Gross receipts \$	<u> 280,018.</u>
	Appli	TOUNGSTOWN, OH 44313-3324		H(a) Is this a group re	
	pendi	F Name and address of principal officer:RICHARD A. SCHAFER		for affiliates?	Yes X No
		6 FEDERAL PLAZA C SUITE 1000, YOUNGSTOW	<u>N, OH</u>	H(b) Are all affiliates incl	uded? Yes No
17	Гах-ех	empt status: X 501(c) (3) ◀ (insert no.)		If "No," attach a l	ist (see instructions)
<u>J \</u>	Nebsi	te: ► WWW.BOARDMANBASEBALL.COM		H(c) Group exemption	number 🕨
K]	ype of	organization: X Corporation Trust Association Other	L Year	of formation: 1952 M	State of legal domicile: OH
Pa	art I	Summary			
ģ	1	Briefly describe the organization's mission or most significant activities: $\underline{\textbf{LITTL}}$	E LEA	<u>GUE BASEBALI</u>	. <u>&</u>
Governance		SOFTBALL			
Ę	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its assets	
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	51
	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	51
S	5	Total number of employees (Part V, line 2a)		5	8
~ ₹	6	Total number of volunteers (estimate if necessary)		6	300
Acti P	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)		7a	0.
> `	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
ง กา				Prior Year	Current Year
ة و	8	Contributions and grants (Part VIII, line 1h)		76,219.	72,787.
Revenue	9	Program service revenue (Part VIII, line 2g)		59,635.	59,884.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		708.	795.
≥ "	i	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		82,342.	106,964.
ζ		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	. [218,904.	240,430.
5—	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		5,000.	5,000.
	14	Benefits paid to or for members (Part IX, column (A), line 4)			
တ္		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		30,537.	34,372.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)			
<u>pe</u>		Total fundraising expenses (Part IX, column (D), line 25)			
ũ	17-	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		221,740.	232,485.
	8			257,277.	271,857.
	9	Total expenses. Add Irries 13- 7 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12		<38,373.	
Soc	63	L 1110 1 1 101		Beginning of Year	End of Year
ets	100	Total assets (Part X, line 1692)		1,556,370.	1,519,779.
ASS	1	Total-liabilities (Rart X, line 26)		14.110.	9,861.
Net Assets or Fund Balances	22	Net assets of fund balances. Subtract line 21 from line 20		1,542,260.	1,509,918.
	rt II	Signature Block			
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and		and to the best of my knowledg	e and belief, it is true, correct,
		and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any	y knowledge	//	
Sigi	n	To WA. Zell.		18/12/10	
Her		Signature of officer		Date '	
		RICHARD A. SCHAFER, TREASURER			
		Type or print name and title			
		Preparer's Date			r's identifying number tructions)
Paid		signature	self em	ployed (see ins	a aosiona)
	arer's	Firm's name (or		EIN ▶	
use	Only	yours if self-employed),			
		address, and ZIP + 4		Phone no.	
May	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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? If "Yes, " complete Schedule C, Part II	- 4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			٦,
_	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			77
_	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
	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			x
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	8		Δ.
9	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?	10		
••	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was	├		_
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		х
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 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 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, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
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 questions 24b-24d and complete Schedule K If "No", go to question 25	04=		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		Λ.
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
Ŭ	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		
	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		Х
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			_ _
	pnor year? If "Yes," complete Schedule L, Part I	25b	<u> </u>	х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
		Form	990 (2008)

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		Х
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? 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 conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
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_
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X_
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
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, Part VI	37		X

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No			
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of						
	U.S. Information Returns. Enter -0- if not applicable 1a 12						
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						
	(gambling) winnings to prize winners?	1c		_X_			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	filed for the calendar year ending with or within the year covered by this return 2a 8						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b_	X				
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	'					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a_		X			
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X			
b	If "Yes," enter the name of the foreign country ▶						
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and	'					
	Financial Accounts						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X			
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited						
	Tax Shelter Transaction?	5c					
6a	Did the organization solicit any contributions that were not tax deductible?	6a		X			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts						
	were not tax deductible?						
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		X			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	:					
	to file Form 8282?	7c		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year . 7d						
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			-			
	benefit contract?	7e		X			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X			
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		X			
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		X			
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)						
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have						
	excess business holdings at any time during the year?	8		X			
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.						
а	Did the organization make any taxable distributions under section 4966?	9a		X			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X			
10	Section 501(c)(7) organizations. Enter: N/A						
а	Initiation fees and capital contributions included on Part VIII, line 12						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities						
11	Section 501(c)(12) organizations. Enter: N/A			i			
а	Gross income from members or shareholders 11a						
b	Gross income from other sources (Do not net amounts due or paid to other sources against						
	amounts due or received from them)						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
b	if "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b						
		Form	990 (2008)			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body 1a 51			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	ļ		
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		_X_
6	Does the organization have members or stockholders?	6		<u>X</u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		<u> </u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		_X_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	_ X_	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a		_X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10		X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	ļ	<u> </u>
Sec	tion B. Policies		1	
			Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		_X_
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		<u>X</u>
14	Does the organization have a written document retention and destruction policy?	14	<u> </u>	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
а	The organization's CEO, Executive Director, or top management official?	15a		<u> X</u>
b	Other officers or key employees of the organization?	15b	 	<u> </u>
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	<u>16b</u>		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶OH			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e for		
	public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ancial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the person who possesses the books and records of the person who person of the person who person of the	tion:		
	RICHARD A. SCHAFER - 330-744-4277			
22200	6 FEDERAL PLAZA CENTRAL, SUITE 1000, YOUNGSTOWN, OH 44503		000	
33200) 00	Form	990	(2008)

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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.

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	verage Position hours (check all that apply)			LΛ	Reportable compensation	Reportable compensation	Estimated amount of		
	per week	Individual trustee or director	Institutional trustee		Key employee	Highest compensated Employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
		ğ	lust	Officer	Key	E H	퉏			
TIMON KAPLE	20.00			3.5				,	0	0
PRESIDENT GREG KRIEGER	20.00	<u> </u>		X				0.	0.	0
SECRETARY	20.00			x				0.	0.	0
RICHARD SCHAFER	20.00	 		^				0.		0
TREASURER	20.00			X				0.	0.	0
TONY TARANTINO	20.00	 	 					, .		
VICE PRESIDENT	15.00			x		L		0.	0.	0
DAVID MATZ										
VICE PRESIDENT	15.00	<u> </u>		X				1,118.	0.	0

Pa	t VII Section A. Officers, Directors, Tru	ıstees, Key Eı	mple	oyee	es, a	nd l	High	est	Compensated Employ	ees (continued)				
	(A)	(B)			(0	C)			(D)	(E)			(F)	
	Name and title	Average			Posi			. I. A	Reportable	Reportable			timate	
		hours per	\vdash	neci I	k all	tnat	app	iy) T	compensation from	compensation from related	'		ount o	וכ
		week	Individual trustee or director				_		the	organizations			pensa	tion
			b io	ag			sated		organization	(W-2/1099-MIS	C)		om the	
			Truste	Institutional trustee	ļ	oyee	Highest compensated employee		(W-2/1099-MISC)			_	anızatı 1 relat	
			ividua	itutio	Officer	Key employee	hesto	Ē					ınızatı	
		}	를	Sil	ŧ	Ke	물등	Ē						
						_								
			<u> </u>	<u> </u>	<u> </u>									
			<u> </u>		<u> </u>		ļ_							
			\vdash	\vdash			┢╌							
				ŀ	ŀ									
				\vdash			\vdash	\vdash						
		•	 	\vdash	\vdash									
								1						
						<u> </u>	_	ļ						
		ļ	-			_	—	<u> </u>						
		<u> </u>			┢			⊢						
						1								
	Total	<u> </u>	<u> </u>	.]		1	_	<u> </u>	1,118.		0.			0.
2	Total number of individuals (including those	e in 1a) who re	Celv	ed r	nore	tha	ın \$1	00.			•		-	
_	compensation from the organization	5 III 14) IIII 0 10					Ψ	,	ooo iii ropontabio		•			(
													Yes	No
3	Did the organization list any former officer,	director or tru	istee	e, ke	y en	nplo	yee,	or h	highest compensated er	mployee on				ļ
	line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4	For any individual listed on line 1a, is the su	=								the organization				
	and related organizations greater than \$15											4		X
5	Did any person listed on line 1a receive or a				from	any	y uni	relat	ted organization for serv	ices rendered to		_		v
	the organization? If "Yes," complete Sched	lule J for such	pers	son	-							5		<u> </u>
1	Complete this table for your five highest co	mnenested in	don	onde	ant c	ont	racti	are f	that received more than	\$100 000 of com	nene	ation f	rom	
	the organization. NONE	impensateu in	uep	GIIG	5111 (,0111	laci	JI 3 I	mat received more man	Ψ100,000 OI COIII	50113	ation		
	(A)	•							(B)			(C	;)	
	Name and business	address							Description of s	services	C	ompe		n
								\dashv						
						-								
2	Total number of independent contractors (i	ncluding those	e in	1) w	ho re	ecer	ved	mor	re than \$100,000 in com	pensation				
	from the organization	0												
												Form	990 /	วกกล

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must compl				
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	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	5,000.	5,000.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the 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	1,118.	1,118.		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	30,586.	30,586.		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	2,668.	2,668.		
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17			:	
f	Investment management fees		1		
g	Other .		C10		
12	Advertising and promotion .	610.	610.		
13	Office expenses .	2,366.	2,366.		
14	Information technology	4,601.	4,601.		
15	Royalties	15 450	15 450		
16	Occupancy	17,472.	17,472.	*	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				- .
19	Conferences, conventions, and meetings	0.07	005		
20	Interest	987.	987.		
21	Payments to affiliates	CO 0C1	CO 0C1		
22	Depreciation, depletion, and amortization	60,864.	60,864.		-
23	Insurance	14,504.	14,504.		
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
	FIELD MAINTAINANCE	39,977.	39,977.		
	BASEBALL EQUIPMENT & UN	35,989.	35,989.		
С	UMPIRE EXPENSE	16,557.	16,557.		
d	EQUIPMENT MAINTENANCE	15,042.	15,042.		
е	TRAINING & CLINICS	7,852.	7,852.		
f	All other expenses	15,664.	15,664.		
25	Total functional expenses Add lines 1 through 24f	271,857.	271,857.	0.	0.
26	Joint Costs. Check here ▶ ☐ If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				

٠.					
	990 (NC.	23-	7318342 Page 1
Pa	rt X	Balance Sheet			,
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	20,706.	1	10,456
	2	Savings and temporary cash investments	53,677.	2	73,887
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, or other related parties Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
		Part II of Schedule L		6	
क	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ø	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost basis 10a 2,119,709.			
	ь	Less accumulated depreciation Complete		ļ	
	<u> </u>	Part VI of Schedule D . 10b 687, 220.	1,478,277.	10c	1,432,489
	11	Investments - publicly traded securities	3,615.	11	2,852
	12	Investments - other secunties. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets .		14	
	15	Other assets See Part IV, line 11	95.	15	95
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,556,370.	16	1,519,779
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18_	
	19	Deferred revenue		19	-
	20	Tax-exempt bond liabilities	,	20	
ies	21	Escrow account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
iat		highest compensated employees, and disqualified persons. Complete Part II			-
_		of Schedule L	44 440	22	2 251
	23	Secured mortgages and notes payable to unrelated third parties	14,110.	23	9,861
	24	Unsecured notes and loans payable		24	
	25	Other liabilities Complete Part X of Schedule D	1 4 110	25	0.061
	26	Total liabilities. Add lines 17 through 25	14,110.	26	9,861
"		Organizations that follow SFAS 117, check here lines 27 through 29, and lines 33 and 34.			
ĕ	07	Unrestricted net assets			
la l	27 28	Temporarily restricted net assets		27	
8		· · ·		28	
Net Assets or Fund Balances	29	Permanently restricted net assets Organizations that do not follow SFAS 117, check here		29	- · · · · · · · · · · · · · · · · · · ·
ͳ		complete lines 30 through 34.			
ts c	30	Capital stock or trust principal, or current funds	0.	30	0
sse	31	Paid in or capital surplus, or land, building, or equipment fund	0.	31	0
it A	32	Retained earnings, endowment, accumulated income, or other funds	1,542,260.		1,509,918
ž	33	Total net assets or fund balances	1,542,260.	33	1,509,918
	34	Total liabilities and net assets/fund balances	1,556,370.		1,519,779

Part XI | Financial Statements and Reporting Yes No Accounting method used to prepare the Form 990 X Cash Accrual Other 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a **b** Were the organization's financial statements audited by an independent accountant? ... 2b c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c 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? X За b If "Yes," did the organization undergo the required audit or audits?

832011 12-18-08

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

2008 Open to Public Inspection

Schedule A (Form 990 or 990-EZ) 2008

OMB No 1545-0047

Employer identification number Name of the organization BOARDMAN COMMUNITY BASEBALL, 23-7318342 Reason for Public Charity Status (All organizations must complete this part) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) 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). (Attach Schedule H.) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 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) A community trust described in section 170(b)(1)(A)(vi), (Complete Part II) 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 the Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 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. _ Type I b Type II c ____ Type III - Functionally integrated d ____ Type III - Other 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) or section 509(a)(2). 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 following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the organizations the organization supports. (iii) Type of (iv) Is the organization (v) Did you notify the (vi) Is the (i) Name of supported (ii) EIN (vii) Amount of organization organization in col. in col. (i) listed in your organization in col. organization support (i) organized in the (described on lines 1-9 governing document? (i) of your support? above or IRC section No (see instructions)) Total

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

	art II Support Schedule for	Organizations	Described in	Sections 170	(b)(1)(A)(iv) an	d 170(b)(1)(A)(Page 2 vi)
	(Complete only if you checked	-			() () () ()	-('/(// //	•
Se	ction A. Public Support						
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and			197 ====			
•	membership fees received. (Do not						
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ızatıon'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					1	
4	Total. Add lines 1 · 3		1	1			
5	The portion of total contributions						
	by each person (other than a	I					
	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						
	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest,					ļ	
	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 carried on					<u></u>	
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					1	
12	Gross receipts from related activities,	etc (see instructi	ions)			12	
13	First five years. If the Form 990 is for	the organization'	s first, second, the	rd, fourth, or fifth t	tax year as a secti	on 501(c)(3)	
_	organization, check this box and stor						_
Se	ction C. Computation of Publ	ic Support Pe	ercentage			. r r	
14	Public support percentage for 2008 (ine 6, column (f) d	livided by line 11,	column (f))		14	%
15						15	%
16	a 33 1/3% support test - 2008. If the o	organization did no	ot check the box o	on line 13, and line	14 is 33 1/3% or	more, check this b	ox and
	stop here. The organization qualifies		-				
ŀ	o 33 1/3% support test - 2007. If the o	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/39	% or more, check t	his box
	and stop here. The organization qual						. ▶∟
178	a 10% -facts-and-circumstances tes						
	and if the organization meets the "fac					art IV how the orga	nization
	meets the "facts-and-circumstances"						▶∟
ŧ	10% -facts-and-circumstances tes						
	more, and if the organization meets the						ie
	arganization mosts the "facts and sire		The ergonization	audition on a subl	lially autoported are	nonton	▶ 1 1

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2008

Schedule A (Form 990 or 990-EZ) 2008 BOARDMAN COMMUNITY BASEBALL INC. 23-7318342 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support (c) 2006 (e) 2008 Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (d) 2007 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") 117,457. 324,684. 76,219. 72,787. 696,739. 105,592. 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 121,168. 140,768. 141,977. 160,543. 660,196. organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 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 201,332. 238,625. 465,452. 218,196. 233,330. 6 Total, Add lines 1 · 5 1,356,935. 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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) 1,356,935 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (d) 2007 (e) 2008 (c) 2006 (f) Total 238,625. 465,452. 218,196. 201,332 233,330 9 Amounts from line 6 1,356,935. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 8,599 7.865 97,924 708 7,100. 122,196. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 8,599. 7,865. 97,924 708. 7,100. 122,196. c Add lines 10a and 10b 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) 479 131 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 91.74 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 88.35 % Section D. Computation of Investment Income Percentage 8.26 17 % 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 9.84 19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not $\triangleright [X]$ more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

Employer identification number

-	BOARDMAN COMMUNITY		23-7318342
Pa			s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (dunng year)		
4	Aggregate value at end of year .		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's		└── Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds may be	e used only
	for chantable purposes and not for the benefit of the donor		· ·
Pa	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, F	Part IV, line 7
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or public use)	oleasure) Preservation of an his	storically important land area
	Protection of natural habitat	Preservation of certification	ed historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a con	servation easement on the last day
	of the tax year		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic sti	2c	
d	Number of conservation easements included in (c) acquired	_2d	
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	e organization during the taxable
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, violations, a	nd
	enforcement of the conservation easements it holds?		. L Yes L No
6	Staff or volunteer hours devoted to monitoring, inspecting, a		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	the organization's accounting for
	conservation easements.	(A .)	
Pai	t III Organizations Maintaining Collections o		tner Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	·	•
	treasures, or other similar assets held for public exhibition, e	•	blic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these		
b	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service	e, provide the following amounts relating to
	these items.		
	(i) Revenues included in Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X	•	. \$
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under SFAS 1	16 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1	• ••	\$
b	Assets included in Form 990, Part X		. • \$
I LI A	For Privacy Act and Panerwork Reduction Act Notice see	Aho Instructions for Force 200	Schedule D /Form 990) 2008

	dule D (Form 990) 2008 BOARDMA † III Organizations Maintaining C	N COMMUNIT					er Sim		318342 ets (contr	
3	Using the organization's accession and other									
	that apply)			Ū	Ů				(
а	Public exhibition	c	ı 🔲	Loan or exc	hange progr	ams				
b	Scholarly research	•		Other						
С	Preservation for future generations								-	
4	Provide a description of the organization's co	ollections and explai	n how t	hey further tl	ne organizat	on's exe	mpt pu	rpose in Pa	art XIV	
5	During the year, did the organization solicit of	r receive donations	of art, h	stoncal trea	sures, or oth	er sımıla	r assets	· }		
	to be sold to raise funds rather than to be m	aintained as part of	the orga	inization's co	lection?_			. [Yes	No_
Pai	t IV Trust, Escrow and Custodia	l Arrangements	. Comp	lete if organi	zation answ	ered "Ye	s" to Fo	rm 990, Pa	art IV, line 9), or
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	s or other as	ssets no	t include	ed		
	on Form 990, Part X?								Yes	☐ No
b	if "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	table						
									Amount	
С	Beginning balance						10	:		
d	Additions during the year						1d	L		
е	Distributions during the year						1e	,		
f	Ending balance	•					1 f			
2a	2a Did the organization include an amount on Form 990, Part X, line 21?									
b	If "Yes," explain the arrangement in Part XIV	·								
Par	Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10									
		(a) Current year	(b) F	rior year	(c) Two yea	rs back	(d) Thre	e years bacl	(e) Four	years back
1a	Beginning of year balance									
b	Contributions .									
С	Investment earnings or losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs .									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the year	r end balance held a	as [.]							
а	Board designated or quasi-endowment		_%							
b	Permanent endowment >	%								
С	Term endowment >	%								
За	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	nd administe	ered for t	the orga	nızatıon	_	
	by.									Yes No
	(i) unrelated organizations		•						3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Sche	dule R?					3b	
_4	Describe in Part XIV the intended uses of the									
Par	t VI Investments - Land, Building	gs, and Equipm	ent. Se	e Form 990,	, Part X, line	10.				
	Description of investment	(a) Cost or o basis (investi		(b) Cost basis		(c) [Deprecia	tion	(d) Book	value
1a	Land .			28	9,609.				289	,609.
b	Buildings				5,125.		531,	935.		3,190.
С	Leasehold improvements			•						
d	Equipment			17	4,975.		155,	285.	19	,690.
е	Other .									
Total	otal. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)									

Schedule D (Form 990) 2008

17

832053 12-23-08

Sche	dule D (Form 990) 2008 BOARDMAN COMMUNITY BASEBALL			23-7318342	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to F	inancial State	ements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	••••	1		
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		
3	Excess or (deficit) for the year Subtract line 2 from line 1	•••	3	·	
	Net unrealized gains (losses) on investments		4		
4					
5	Donated services and use of facilities		5	<u>.</u>	
6	Investment expenses .		6		
7	Prior period adjustments		7		
8	Other (Describe in Part XIV)		8		
9	Total adjustments (net) Add lines 4-8		9		
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10		
Par	t XII Reconciliation of Revenue per Audited Financial Statement	ts With Rever	nue per F	Return	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	•	·		
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b		†	
				-	
С.	Recoveries of prior year grants	2c		+	
d	Other (Describe in Part XIV)	2d		4 _	
е	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:	1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_ [
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)			5	
Pai	t XIII Reconciliation of Expenses per Audited Financial Statemen	nts With Expe	nses pei	r Return	
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.				
_	Donated services and use of facilities	22			
4	_ · · · · · · · · · · · · · · · · · · ·	2a		╡ ┃	
b	Prior year adjustments	2b		-	
C	Losses reported on Form 990, Part IX, line 25	2c		-	
ď	Other (Describe in Part XIV)	2d		4 1	
е	Add lines 2a through 2d	•		2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		<u>.</u>	
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	
Par	t XIV Supplemental Information			 	
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 4, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	ines 1a and 4, Pa	ırt IV, lines 1	1b and 2b; Part V, line	4; Part

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

► Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

2008

Open To Public Inspection

Name of the organization			-			Employer ide	ntification number				
BOARDMA	N COMMUNITY BASEBA	LL,	IN	iC.		23-7318	342				
Part I Fundraising Activities	- Complete if the organization answer	ered "\	'es" to	o Form 990, Part IV,	line 1	7.					
b If "Yes," list the ten highest paid ind	e Solicitat f Solicitat g Special or oral agreement with any individual Part VII) or entity in connection with p	tion of tion of fundra (includerofess uant to	non-g gover using ding o ional to agre	overnment grants nment grants events fficers, directors, tru- fundraising services? ements under which	stees ? the fi	Yes					
(i) Name of Individual or entity (fundraiser)	(ii) Activity	(iii) p		or control of		(iii) Did fundraiser have custody or control of		(iv) Gross receipts from activity	(v) Amoun to (or retain fundrais	Amount paid ir retained by) fundraiser ed in col (i)	(vi) Amount paid to (or retained by) organization
,		Yes	No								
							,				
							1200				
-											
Total	>	•									
3 List all states in which the organization	on is registered or licensed to solicit f	unds o	r has	been notified it is ex	empt	from registrati	on or licensing.				
		•									
HA For Privacy Act and Paperwork Re	duction Act Notice, see the Instru	ctions	for F	orm 990.	Sched	ule G (Form 9	90 or 990-F7) 2008				

Schedule G (Form 990 or 990-EZ) 2008 BOARDMAN COMMUNITY BASEBALL. INC. Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000. (b) Event #2 (a) Event #1 (c) Other Events (d) Total Events PLAYER (Add col (a) through TOURNAMENTS FUNDRAISER col. (c)) (event type) (event type) (total number) Revenue 61,817 30,485 Gross receipts 48,384 140,686. Less: Charitable contributions 61,817. 30,485 Gross revenue (line 1 minus line 2) 48,384 140,686. Cash prizes 3,500 3,500. 694 Non-cash prizes 694. Direct Expenses Rent/facility costs 11,368. 984 Other direct expenses 23,042 35,394. Direct expense summary. Add lines 4 through 7 in column (d) 39,588. 101,098. Net income summary. Combine lines 3 and 8 in column (d) Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/Instant (d) Total gaming (Add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col (c)) Gross revenue Cash prizes **Direct Expenses** Non-cash prizes Rent/facility costs Other direct expenses % Yes % Yes Yes Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Combine lines 1 and 7 in column (d) Yes No Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? 9a b If "No," Explain. 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," Explain: Does the organization operate gaming activities with nonmembers? 11 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

Schedule G (Form 990 or 990-EZ) 2008

Schedule G (Form 990 or 990-EZ) 2008 BOARDMAN COMMUNITY BASEBALL, INC.	23-731	<u>.834</u>	2 P	age 3
			Yes	No
13 Indicate the percentage of gaming activity operated in:				
a The organization's facility	3a %			
	3b %]		İ
14 Provide the name and address of the person who prepares the organization's gaming/special events books	and records:			
Name				
Address >				
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue	ie?	15a		
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and to of gaming revenue retained by the third party ▶ \$	ne amount			
c If "Yes," enter name and address:				
Name				
Address ▶				
16 Gaming manager information				
Name				
Gaming manager compensation > \$				
Description of services provided				
Director/officer Employee Independent contractor				
17 Mandatory distributions				
a is the organization required under state law to make charitable distributions from the gaming proceeds to				
retain the state gaming license?	•	17a		
b Enter the amount of distributions required under state law distributed to other exempt organizations or spen	t in the			
organization's own exempt activities during the tax year ▶ \$		1		

Schedule G (Form 990 or 990-EZ) 2008

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization BOARDMAN COMMUNITY BASEBALL, INC.	Employer identification number 23-7318342
FORM 990, PART VI, SECTION A, LINE 10: 990 IS REVIEWED BY	TREASURER.
FORM 990, PART VI, SECTION C, LINE 19: ALL INFORMATION IS	OPEN TO THE
PUBLIC INSPECTION AND IS AVAILABLE UPON REQUEST AT THE OFF	FICE OF BOARDMAN
COMMUNITY BASEBALL.	
	1
	

4562 Form

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization 990 (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

2008

Attachment Sequence No. 67

OMB No 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying number FORM 9<u>90 PAGE 10</u> BOARDMAN COMMUNITY BASEBALL, INC. 23-7318342 Part ! Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 250,000. 1 Maximum amount See the instructions for a higher limit for certain businesses 2 2 Total cost of section 179 property placed in service (see instructions) 3 800,000. Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2, If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property Enter the amount from line 29 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 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 2009. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation for qualified property (other than listed property) placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 60,864 16 Other depreciation (including ACRS) 16 Part III | MACRS Depreciation (Do not include listed property) (See instructions) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2008 17 18 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 2008 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use (b) Month and (d) Recovery (a) Classification of property year placed in service (e) Convention (f) Method (q) Depreciation deduction only - see instructions) 19a 3-year property 5-year property b 7-year property C d 10-year property 15-year property е 20-year property S/L 25-year property 25 yrs. g 27.5 yrs MM S/L h Residential rental property 27.5 yrs MM S/L 39 yrs MM S/L i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12-year 12 yrs. S/L 40-year ММ S/L 40 yrs Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 60,864. Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr. 22

portion of the basis attributable to section 263A costs

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

Form 4562 (2008) BOARDMAN COMMUNITY BASEBALL, 23-7318342 Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the Instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? 24b If "Yes," is the evidence written? No Yes Yes ſb۱ (c) (e) (i) (f) (g) (h) Date Business/ Elected Basis for depreciation Type of property Recovery Depreciation Cost or Method/ placed in investment (business/investment section 179 (list vehicles first) other basis period Convention deduction use percentage service use only) cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use Property used more than 50% in a qualified business use: % % % 27 Property used 50% or less in a qualified business use % S/L S/L % % S/L -28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 <u>29</u> Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (d) (a) (b) (c) (e) (f) 30 Total business/investment miles driven during the Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use Yes No Yes No Yes Nο Yes No Yes No Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicle. Part VI | Amortization (f) (b) (c) (d) (e) (a) Description of costs Amortizable amount Code section period or percentag begins 42 Amortization of costs that begins during your 2008 tax year

43 Amortization of costs that began before your 2008 tax year 44 Total, Add amounts in column (f). See the instructions for where to report

816252 11-08-08

Form 4562 (2008)

43

Form 8868

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

-	are filing for an <mark>Automatic 3-Month Extension, complete only Part I</mark> and check this box are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form).	▶ X
Do not c	omplete Part II unless you have already been granted an automatic 3-month extension on a previously fi	ed Form 8	368.
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
corpora Part I onl	ation required to file Form 990-T and requesting an automatic 6-month extension - check this box and com y	plete	>
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar ome tax returns	extension	of time
oted be not auto ou must	ic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic matic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consubmit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file povietile and click on e-file for Chanties & Nonprofits	cally if (1) y nsolidated	ou want the additional Form 990-T Instead,
ype or rint	Name of Exempt Organization	Employer	identification number
	BOARDMAN COMMUNITY BASEBALL, INC.	23-	7318342
ile by the ue date for ling your eturn See	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 3524		
structions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. YOUNGSTOWN, OH 44513-3524		
heck ty	pe of return to be filed (file a separate application for each return)		
For	m 990	27 69	
Teleph	RICHARD A. SCHAFER — 6 FEDERAL PLAZA CE poks are in the care of ► YOUNGSTOWN, OH 44503 none No. ► 330-744-4277 FAX No. ► 330-744-1734 organization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for part of the group, check this box ► and attach a list with the names and EINs of all	s is for the	. ▶ □ whole group, check this
ıs fo	quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unto MAY 15, 2010, to file the exempt organization return for the organization named a por the organization's return for: calendar year or X tax year beginning OCT 1, 2008, and ending SEP 30, 2009		extension
2 If th	is tax year is for less than 12 months, check reason	Chan	ge in accounting period
	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	20 6	
	refundable credits. See instructions is application is for Form 990-PF or 990-T, enter any refundable credits and estimated	3a \$	·····
	payments made. Include any prior year overpayment allowed as a credit	3ь \$	
dep	ance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, osit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	3c \$	N/A
	If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form		
	or Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form 8868 (Rev 4-2009)

Form 0000	/Pay 4 0000\			Dago O	
	(Rev. 4-2009)	_	·	Page 2	
-	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo			. X	
	ly complete Part II if you have already been granted an automatic 3-month extension on a previously filed	Form	8868		
	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)				
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no continuous)	i i			
Type or	Name of Exempt Organization	Emp	loyer identifica	ation number	
print	BOARDMAN COMMUNITY BASEBALL, INC.	2	3-73183	42	
File by the extended due date for	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 3524	For I	RS use only		
filing the return See instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions. YOUNGSTOWN, OH 44513-3524	L			
X For	pe of return to be filed (File a separate application for each return): m 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A m 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	=	orm 5227 C	Form 8870	
STOP! Do	o not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	ed Form 8868.		
Teleph	RICHARD A. SCHAFER - 6 FEDERAL PLAZA CE cooks are in the care of ► <u>YOUNGSTOWN</u> , OH 44503 one No.► 330-744-4277 FAX No.► 330-744-1734 organization does not have an office or place of business in the United States, check this box		AL, SUI	FE 1000 ► □	
• If this i	s for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the	s is fo	r the whole gro	up, check this	
box ▶	If it is for part of the group, check this box > and attach a list with the names and EINs of all	memb	ers the extensi	on is for.	
4 I red	quest an additional 3-month extension of time until <u>AUGUST 16, 2010</u> .				
5 For	calendar year, or other tax year beginning OCT 1, 2008, and ending _	SEP	30, 200	09	
6 If th	6 If this tax year is for less than 12 months, check reason: 🔲 Initial return 🔲 Final return 🔲 Change in accounting				
7 Sta	te in detail why you need the extension				
		I	-		
	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	_			
	refundable credits. See instructions.	_8a_			
	is application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated				
	payments made Include any prior year overpayment allowed as a credit and any amount paid	OL	.		
	viously with Form 8868. ance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	8b	\$		
	i FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	N/A	
AAITI	Signature and Verification	- OC	Ψ	A1/41	
	lities of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the orrect, and complete, and that I am authorized to prepare this form.	best o	f my knowledge a	and belief,	
Signature I	► TREASURER	Date	•		

Form **8868** (Rev. 4-2009)