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Short Form
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)

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

2009

Open to Public
Inspection

A For the 2009 calendar year, or tax year beginning , 2009, and ending

B Check if applicable	Please use IRS label or print or type. See Specific Instructions.	C Name of organization Stevens Point Youth Baseball Association, Inc.	D Employer identification number 39-1612347
Address change	Number and street (or P O box, if mail is not delivered to street address)	Room/suite	E Telephone number 715-344-0890
Name change	P.O. Box 615		F Group Exemption Number . . . ►
Initial return	City or town, state or county, and ZIP + 4		
Termination	Stevens Point, WI 54481		
Amended return			
Application pending			

- Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method Cash Accrual
Other (specify) ►

I Website: ► www.spyba.org

J Tax-exempt status (check only one) - 501(c)(3) ► (insert no) 4947(a)(1) or 527

K Check ► if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ . . . ► \$ 108,730.00

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)

1	Contributions, gifts, grants, and similar amounts received	1	16,475.00
2	Program service revenue including government fees and contracts	2	
3	Membership dues and assessments	3	28,614.00
4	Investment income	4	1,034.00
5 a	Gross amount from sale of assets other than inventory	5a	
b	Less cost or other basis and sales expenses	5b	
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here . . . ►		
a	Gross revenue (not including \$ 7,300.00 of contributions reported on line 1)	6a	61,223.00
b	Less direct expenses other than fundraising expenses	6b	41,895.00
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	19,328.00
7 a	Gross sales of inventory, less returns and allowances	7a	
b	Less cost of goods sold	7b	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8	Other revenue (describe ► photo reimbursement)	8	1,384.00
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	66,835.00
10	Grants and similar amounts paid (attach schedule)	10	2,500.00
11	Benefits paid to or for members	11	32,092.00
12	Salaries, other compensation, and employee benefits	12	
13	Professional fees and other payments to independent contractors	13	14,110.00
14	Occupancy, rent, utilities, and maintenance	14	919.00
15	Printing, publications, postage, and shipping	15	2,026.00
16	Other expenses (describe ►)	16	9,181.00
17	Total expenses. Add lines 10 through 16	17	60,828.00
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	6,007.00
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	67,338.00
20	Other changes in net assets or fund balances (attach explanation)	20	473.00
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	73,818.00

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	41,638.00	22 48,118.00
23 Land and buildings		23
24 Other assets (describe ►)	25,700.00	24 25,700.00
25 Total assets	67,338.00	25 73,818.00
26 Total liabilities (describe ►)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	67,338.00	27 73,818.00

9-9-24

Part III Statement of Program Service Accomplishments (See the instructions for Part III)

What is the organization's primary exempt purpose? _____

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

Expenses
 (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28 See Attached Schedule

(Grants \$

) If this amount includes foreign grants, check here ► **28a****29**

(Grants \$

) If this amount includes foreign grants, check here ► **29a****30**

(Grants \$

) If this amount includes foreign grants, check here ► **30a****31** Other program services (attach schedule)

(Grants \$

) If this amount includes foreign grants, check here ► **31a****32** Total program service expenses (add lines 28a through 31a) ► **32****Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)**

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
See Attached Schedule				

Part V Other Information (Note the statement requirements in the instructions for Part V)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	X
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a 0.00	37a	0.00
b Did the organization file Form 1120-POL for this year?	37b	X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations Enter	39a	
a Initiation fees and capital contributions included on line 9	39b	
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► 0.00 , section 4912 ► 0.00 ; section 4955 ► 0.00	40b	X
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► 0.00		
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ► 0.00		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	X
41 List the states with which a copy of this return is filed ►		
42a The organization's books are in care of ► Brad Franz Telephone no ► (715) 252-7357 Located at ► 3146 Feltz Avenue, Stevens Point, WI ZIP + 4 ► 54481		
b 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)?	42b	X
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.	42c	X
c At any time during the calendar year, did the organization maintain an office outside of the U S ?		
If "Yes," enter the name of the foreign country ►		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ► 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51

46 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 Yes No
 46 47 48 49a 49b
 47 48 49a 49b
 48 49a 49b
 49a 49b
 50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization If there is none, enter "None"

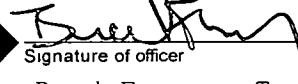
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

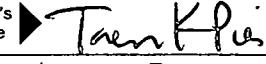
f Total number of other employees paid over \$100,000 ►

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors receiving over \$100,000 ►

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	Signature of officer 	Date May , 2010 5/14/10	Preparer's identifying number (See instructions)
	Brad Franz - Treasurer	Type or print name and title	

Paid Preparer's Use Only	Preparer's signature 	Date 5/13/10	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 Torren K. Pies, Anderson Law Firm PO Box 228, Stevens Point, WI 54481	EIN 39-0856488	Phone no (715) 344-0890	

May the IRS discuss this return with the preparer shown above? See instructions ► Yes No

Form 990-EZ (2009)

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization

Stevens Point Youth Baseball Association, Inc.

Employer identification number

39-1612347

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1	<input type="checkbox"/>	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i) .				
2	<input type="checkbox"/>	A school described in section 170(b)(1)(A)(ii) . (Attach Schedule E)				
3	<input type="checkbox"/>	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii) .				
4	<input type="checkbox"/>	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				
5	<input type="checkbox"/>	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)				
6	<input type="checkbox"/>	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v) .				
7	<input type="checkbox"/>	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) . (Complete Part II)				
8	<input type="checkbox"/>	A community trust described in section 170(b)(1)(A)(vi) . (Complete Part II)				
9	<input checked="" type="checkbox"/>	An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) . (Complete Part III)				
10	<input type="checkbox"/>	An organization organized and operated exclusively to test for public safety See section 509(a)(4) .				
11	<input type="checkbox"/>	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				
	a <input type="checkbox"/>	Type I	b <input type="checkbox"/>	Type II		
	c <input type="checkbox"/>	Type III - Functionally integrated		d <input type="checkbox"/>	Type III - Other	
e	<input type="checkbox"/>	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)				
f	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					<input type="checkbox"/>
g	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, the governing body of the supported organization?				
	(ii)	A family member of a person described in (i) above?				
	(iii)	A 35% controlled entity of a person described in (i) or (ii) above?				
h	Provide the following information about the supported organization(s)					

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s)

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

Schedule A (Form 990 or 990-EZ) 2009

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I)
Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10 . .						
12 Gross receipts from related activities, etc (see instructions)					12	
13 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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
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 ► <input type="checkbox"/>		

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

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	21,606.00	26,106.00	30,518.00	41,688.00	45,089.00	165,007.00
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	48,556.00	49,385.00	65,163.00	61,275.00	61,223.00	285,602.00
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0.00	0.00	0.00	0.00	0.00	0.00
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0.00	0.00	0.00	0.00	0.00	0.00
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0.00	0.00	0.00	0.00	0.00	0.00
6 Total. Add lines 1 through 5	70,162.00	75,491.00	95,681.00	102,963.00	106,312.00	450,609.00
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0.00	0.00	0.00	0.00	0.00	0.00
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0.00	0.00	0.00	0.00	0.00	0.00
c Add lines 7a and 7b.	0.00	0.00	0.00	0.00	0.00	0.00
8 Public support (Subtract line 7c from line 6)						450,609.00

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6.	70,162.00	75,491.00	95,681.00	102,963.00	106,312.00	450,609.00
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	205.00	1,120.00	1,076.00	1,292.00	1,034.00	4,727.00
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0.00	0.00	0.00	0.00	0.00	0.00
c Add lines 10a and 10b	205.00	1,120.00	1,076.00	1,292.00	1,034.00	4,727.00
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0.00	0.00	0.00	0.00	0.00	0.00
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	1,871.00	1,739.00	948.00	1,028.00	1,384.00	6,970.00
13 Total support. (Add lines 9, 10c, 11, and 12)	72,238.00	78,350.00	97,705.00	105,283.00	108,730.00	462,306.00
14 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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	97.4699 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	97.6562 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	1.0225 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	0.9341 %
19a 33 1/3% support tests - 2009. 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 more than 33 1/3%, check this box and stop here The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b 33 1/3% support tests - 2008. 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 ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b, or Part III, line 12. Provide any other additional information. See instructions

Part III, Line 12 - Photo Reimbursement

FORM 990EZ -- 2009**STEVENS POINT YOUTH BASEBALL ASSOCIATION, INC.**
FEIN: 39-1612347**Schedule for Part I, Line 6**

The following were the three (3) fund raising events (special events) of the corporation in 2009:

1. Pizza sales for the purpose to raise funds to finance the organization's exempt activities.
2. Baseball tournaments for the participants in the leagues.
3. Food sales at the City of Stevens Point's summer 4th of July festival known as Riverfront Rendezvous to raise funds to finance the organization's exempt activities.

Each of the special events are substantially related to the exempt function of the organization given the nature of each event, and the funds generated further the organization's exempt function.

Special Events

	<u>Gross Receipts</u>	<u>Less: Contributions</u>	<u>Gross Revenue</u>	<u>Less: Direct Expenses</u>	<u>Net Income</u>
1. Pizza Sales	\$48,799.00	\$7,300.00	\$41,499.00	\$28,830.00	\$12,669.00
2. Tournaments	8,449.00	0.00	8,449.00	7,899.00	550.00
3. Riverfront Rendezvous	11,275.00	0.00	11,275.00	5,166.00	6,109.00
TOTAL	\$68,523.00	\$7,300.00	\$61,223.00	\$41,895.00	\$19,328.00

FORM 990EZ -- 2009

STEVENS POINT YOUTH BASEBALL ASSOCIATION, INC.
FEIN: 39-1612347

Schedule for Part I, Line 10

Contribution Paid in Year 2009.

1. \$2,500.00 contribution paid to the University of Wisconsin - Stevens Point Baseball Team Dugout Club, Stevens Point, Wisconsin for a contribution towards field improvements at the UWSP Baseball Field.

FORM 990EZ -- 2009

STEVENS POINT YOUTH BASEBALL ASSOCIATION, INC.
FEIN: 39-1612347

Schedule for Part I, Line 20

The change in net assets, an increase of \$473, reflects a bookkeeping adjustment from a prior tax year.

FORM 990EZ -- 2009

STEVENS POINT YOUTH BASEBALL ASSOCIATION, INC.
FEIN: 39-1612347

Schedule for Part III

The Corporation's program services provide the teaching of basic fundamentals of baseball and team competition for youth through league play. Players are formed into teams varying in different age groups with the team of a respective age group playing other teams from the group. The age groups during the 2009 baseball season included ages 5-15. At the end of the season, teams may compete in tournaments, including Babe Ruth and Cal Ripken baseball tournaments.

FORM 990EZ -- 2009

STEVENS POINT YOUTH BASEBALL ASSOCIATION, INC.
FEIN: 39-1612347

Schedule for Part IV

<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>	<u>E</u>
Mark Nalbach 1500 Oneida Drive Plover, WI 54467	Director & President	\$0	\$0	\$0
Kenny Rozek 7512 County Road KQ Custer, WI 54423	Director & Vice President	\$0	\$0	\$0
Craig Shuler 3334 Dan's Drive Stevens Point, WI 54481	Director & Secretary	\$0	\$0	\$0
Gary Flora 7220 Ridgeland Way Custer, WI 54423	Director & Treasurer	\$0	\$0	\$0
Ron Dufresne 5509 Elmwood Ave. Stevens Point, WI 54481	Director	\$0	\$0	\$0
Carl Hurrish 3372 Town Line Road Stevens Point, WI 54481	Director	\$0	\$0	\$0
Beth Molski 1566 Willow Springs Drive Stevens Point, WI 54481	Director	\$0	\$0	\$0
Bruce Ruzek 703 Sunset Avenue Stevens Point, WI 54481	Director	\$0	\$0	\$0
Mark McHugh 7545 County Road Z Custer, WI 54423	Director	\$0	\$0	\$0
Jim Winch 301 Chapley Avenue Junction City, WI 54443	Director	\$0	\$0	\$0
Sean Schneider 5539 Claret Court Stevens Point, WI 54481	Director	\$0	\$0	\$0
Jeff Zelinski 2132 Madison Street Stevens Point, WI 54481	Director	\$0	\$0	\$0
Rod Larson 1066 DuBay Drive Mosinee, WI 54455	Director	\$0	\$0	\$0
Dan Olds 5730 Oakland Drive Stevens Point, WI 54481	Director	\$0	\$0	\$0
Brad Franz 3146 Feltz Avenue Stevens Point, WI 54481	Director	\$0	\$0	\$0

FORM 990EZ -- 2009

STEVENS POINT YOUTH BASEBALL ASSOCIATION, INC.
FEIN: 39-1612347

Schedule for Part V

The net income from special events as set forth on Line 6c of Part I is not an unrelated trade or business activity that should be reported on Form 990-T because the special events are substantially related to the exempt function of the organization.