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Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

A For the	ne 2009 calendar year, or tax year beginning and endi	ng					
B Check applica	of Die Please use RS C Name of organization	D Employer identifi	cation number				
X Add							
Narr	ne type D D	86-1	141299				
Initia		n/suite E Telephone numbe					
Tern	ISPECIFIC 15/1 CEUMANT POAD	· · · · · · · · · · · · · · · · · · ·	371-2841				
	ended tions Community and 71D 4	G Gross receipts \$	278,945.				
App		H(a) Is this a group re					
pen		for affiliates?	Yes X No				
	719 LOCUST LANE, AMBLER, PA 19002	H(b) Are all affiliates inc					
I Tax-e	xempt status X 501(c) (3) ◀ (insert no)		list (see instructions)				
•	site: WWW.PITCHINFORBASEBALL.ORG	H(c) Group exemptio					
		Year of formation: 2005					
Part I							
0 1	Briefly describe the organization's mission or most significant activities PROVIDE	BASEBALL EOUI	PMENT FOR				
Governance	THE NEEDY						
E 2	Check this box if the organization discontinued its operations or disposed o	f more than 25% of its net as	ssets				
3	Number of voting members of the governing body (Part VI, line 1a)	3	10				
	Number of independent voting members of the governing body (Part VI, line 1b)	4	9				
Activities & 2 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	Total number of employees (Part V, line 2a)	5	2				
€ 6	্যিট্রোল্টালুচ্চুত্বপূর্ব্ব (estimate if necessary)	6	10				
_ € /7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.				
ੂ⊀ b	Net unrelated business axable income from Form 990-T, line 34	7b	0.				
2 10	NOV 2 2 2010 Q	Prior Year	Current Year				
2/ 1/10	Contributions and grants (Part VIII, line 1h)	150,051.	278,937.				
~ =	(Rangelice Javenue (Part VIII, line 2g)		2,3,30,1				
2 2 10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	206.	8.				
œ 11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2001					
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	150,257.	278,945.				
13		97,524.	125,493.				
14	Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	123/1250				
	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	39,106.	88,837.				
9 16	a Professional fundraising fees (Part IX, column (A), line 11e)	33/2001	00/03/1				
ונט	b Total fundraising expenses (Part IX, column (D), line 25) 4,800.						
— Ď ₁₇	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	52,926.	65,383.				
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	189,556.	279,713.				
I	Revenue less expenses Subtract line 18 from line 12	-39,299.	-768 .				
Sec	Tiorenso roco onportoco essenso inte ro trom tinto 12	Beginning of Current Year	End of Year				
왕 <u>투</u> 20	Total assets (Part X, line 16)	103,650.	97,293.				
Net Assets or Fund Balances	Total liabilities (Part X, line 26)	6,976.	1,387.				
된 22	Net assets or fund balances Subtract line 21 from line 20	96,674.	95,906.				
Part I		3070,20	<u> </u>				
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and state	ments, and to the best of my knowled	ge and belief, it is true, correct,				
	and complete Declaration of preparer (other than officer) is based on all information of which preparer has any kno	wledge 1					
Sign	NUWAM UNOWIT	11/12	12010				
Here	Signature of officer	Date	 				
	MURRAY AUGUST TREASURER	· ·					
	Type or print name and title	- ···					
	Preparer's Date		er's identifying number				
Preparer's signature 11/12/10 employed 11/							
	address, and ZIP+4 OAKS, PA 19456	Phone no. ► (610)666-0450				
May the	IRS discuss this return with the preparer shown above? (see instructions)		X Yes No				
932001 02		te instructions.	Form 990 (2009)				

	990 (2009) PITCH IN FOR BASEBALL rt III Statement of Program Service Accomplishments	86-1	141299	Page 2
1	Briefly describe the organization's mission TO PROVIDE BASEBALL EQUIPMENT AND SUPPLIES TO YOUTHS IN TRAGEDY STRICKEN AREAS	1 LOW	INCOME	AND
	TRAGEDT STRICKEN AREAS			
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O	,	Yes	x No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services If "Yes," describe these changes on Schedule O	?	Yes	s X No
4	Describe the exempt purpose achievements for each of the organization's three largest program services by e Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of allocations to others, the total expenses, and revenue, if any, for each program service reported	•	nd	
4a		Revenue \$	278 INCOME	,937.) AND
4b	(Code.) (Expenses \$ including grants of \$) (i	Revenue \$)
4c	(Code) (Expenses \$ including grants of \$) (F	Revenue \$)
			111	
4d	Other program services (Describe in Schedule O.)			
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ \$ 253,802.)	 	
			Form 9	90 (2009)

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	<u>X</u>	
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	_		7,
	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 reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	<u></u>	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
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			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X		-	
	as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Scriedule D,			
	Part VI			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12		<u> X</u>
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business.	14a		_ <u>X</u> _
D	and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	446		v
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b		<u> </u>
ı	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	13	-21	
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions 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 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u>X</u>
20_	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<u>X</u>
		Form '	990 (2	2009)

Form 990 (2009) PITCH IN FOR BASEBALL Part IV Checklist of Required Schedules (continued)

Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), In a 17 if "Yes," complete Schedule I, Parts I and II 21 IX 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A); Inia 27 if "Yes," complete Schedule I, Parts I and III 22 Did the organization report very the Part VIII, Section A, Ine 3, 4, or 5 about compensation of the organization's current and former officers, directors, flustess, key employees, and inghest compensated employees? If "Yes," complete Schedule J and the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24th through 24d and complete Schedule J. If "Win", or jot here 25 Did the organization navies any proceeds of tax exempt bonds beyond a temporary period exception? Did the organization may be proceeded of the property of the organization and the part of "Yes," complete Schedule L, Part I yes. Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a princy year, and that the transaction has not been reported on any of the organization spinor Forms 990 or 9995 cry 995-279 "Yes," complete Schedule L, Part I yes. Schedule L, Part I yes, a complete Schedule L, Part I yes, and that the transaction has not been reported on any of the organization spinor organization organization provide a grant or other assistance to an officer, director, trustee, key employee, biphly compensated employee, or disqualified person on a party to a business transaction with one of the following parties, (see Schedule L, Part IV and the organization law organization organization organization organization org			T	_	
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22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A); tine 2? if "Yes," complete Schedule I, Part I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule Is Schedule Is year, that was issued after December 31, 2002? If "Yes," answer lines 24b Irhrough 24d and complete Schedule K. If "No.", go to line 25 Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b Irhrough 24d and complete Schedule K. If "No.", go to line 25 Did the organization maintain an escrow account other than a refunding escrow at any time during the year? Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24d Did the organization answer that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If Yes, "complete Schedule L, Part II b is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If Yes, "complete Schedule L, Part II b is the organization as of the end of the organization's prior Forms 990 or 990 EZ? If "Yes," complete Schedule L, Part IV is the organization part of the interest of the organization's prior Forms 990 or 990 EZ? If "Yes," complete Schedule L, Part IV is instructions for applicable in the part of the organization or other assistance to an officer, director, frustee, key employee, highly compensated employee, or disqualified continuous or a part of the organization exceptions) and Acc	21	· · · · · · · · · · · · · · · · · · ·			
column (A); tine 27 if "Yes," complete Schedule I, Parts I and III 2 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I 23 X 2 Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I, I" "No.", go to line 25 24b Did the organization mines any proceeds of tax exempt bonds beyond a temporary period exception? 24d Did the organization maintain an escrew account other than a refunding escrow at any time during the year of the organization and at as an "on behalf of" issuer for bonds outstanding at my time during the year? 24d Did the organization and at as an "on behalf of" issuer for bonds outstanding at my time during the year? 24d Did the organization and at as an "on behalf of" issuer for bonds outstanding at my time during the year? 24d Did the organization and at as an "on behalf of" issuer for bonds outstanding at my time during the year? 24d Did the organization and at as an "on behalf of" issuer for bonds outstanding at my time during the year? 24d Did the organization and at as an "on behalf of" issuer for bonds outstanding at my time during the year? 24d Did the organization and that the transaction have that a disqualified person during the year? If "Yes," complete Schedule L, Part I I I Is the organization and the analysis of the part of the part of the part of the part of the my time of the my time of the part of the my time of the my time of the part of the part of the organization and the part of the my time of the part of the part of the organization and the part of the organization of the assistance to an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV I I I I I I I I I I I I I I I I I	20		21		
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 6 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J line was included by the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 bill the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d or Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d or Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d or Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d or Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d or Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d or Did the organization act as an "on behalf of" issuer for bonds outstanding as off the year? 14f Yes, "complete Schedule L, Part I V and that the transaction ware that it engaged in an excess benefit transaction with a disqualified person in a promy year, and that the transaction ware accounted to the organization's promy of the organization's promy of year, and that the transaction ware the year? 14f Yes, "complete Schedule L, Part IV and the organization growed a grant or other assistance to an officer, director, trustee, key employee, substantial contribution, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part IV	22				v
and former officers, directors, frustees, key employees, and highest compensated employees? // "Yes," complete Schedule J. A. Dot 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? // "Yes," answer lines 240 through 24d and complete Schedule K. If "No', go to line 25 b. Did the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-exempt bonds? Did the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? Did the organization according to the year? If "Yes," complete Schedule L, Part I I I I I I I I I I I I I I I I I I I	22		22		
Schedule J 2a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 5 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 6 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 2d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 2d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 2d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 2d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 2d Did the organization as an 'in behalf of' issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? 2d Did the organization as an 'in behalf of' issuer for bonds outstanding as a fire year. Complete Schedule L. Part II as the organization and that the transaction with a disqualified person unit and provide a grant or former officer, director, trustee, key employee. Part II as the organization party to a business transaction with one of the following parties, (see Schedule L., Part IV anistructions for applicable fling thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L., Part IV anistructions for applicable fling thresholds, conditions, and exceptions and organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation con	23	· · · · · · · · · · · · · · · · · · ·			
24a Dd the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 Dd the organization invest any proceeds of fax-exempt bonds beyond a temporary peniod exception? Dd the organization invest any proceeds of fax-exempt bonds beyond a temporary peniod exception? Dd the organization invest any proceeds of fax-exempt bonds beyond a temporary peniod exception? Dd the organization invest any proceeds of fax-exempt bonds beyond a temporary peniod exception? Dd the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d. 25d. Section 501(x)(3) and 501(x)(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 b is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I W was a loan toor by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of ithe end of the e					v
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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 X 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 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 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O			29		
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Note. All Form 990 filers are required to complete Schedule O	38		-3,		
	~		38	_x	
					SUUO!

Form 990 (2009) PITCH IN FOR BASEBALL
Part V 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			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2 a	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 2			
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)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		_ <u>X</u> _
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			77
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	_4a		<u>X</u>
D	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			
50	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	E ~		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	30		
·	Tax Shelter Transaction?	5c		
Gā	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		- 1	
	any contributions that were not tax deductible?	6a	ĺ	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
	provided to the payor?	7a		<u>X</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		<u> </u>
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal		İ	
_	benefit contract?	7e		
f		7f		
-	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
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			
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.)			
	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 12b		2000	
		Form	990 (20091

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent 9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	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		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
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		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
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	Х	
9	Is there any officer, director, 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	9		<u> X</u>
Sec	tion B. Policies (This Section D requests information about policies not required by the internal Revenue Code)	 -		
	·		Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		<u>X</u>
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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u> </u>
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	40		
40	In Schedule O how this is done	12c		v
13	Does the organization have a written whistleblower policy?	13		X
14 15	Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	14		
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official	15a		<u>x</u> _
	Other officers or key employees of the organization	15b		X
J	If "Yes" to line 15a or 15b, 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	ĺ		
	taxable entity duning the year?	16a		х
ь	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?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶PA			
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	or		
	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, an	d fina	ncial	
	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	on 🕨	·	
	MURRAY AUGUST, TREASURER			
	101 SUMMIT LANE, BALA CYNWYD, PA 19004			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. 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 Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours	(cl		Pos call t		ı app	lv)	Reportable compensation	Reportable compensation	Estimated amount of
	per week	Indiv dual trustee or director	Instit utional trustee	Officer		High st compensated Emphyse		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
DAVID RHODE										_
EXECUTIVE DIRECTOR	40.00	X		X		ļ		70,000.	0.	0.
ROY SMALLEY, III		l							_	_
PRESIDENT	3.00	X		X	<u> </u>	ļ		0.	0.	0.
ANGELA C. MARCANTONINI	1	l								
SECRETARY	10.00	X		X		_		0.	0.	0.
BILL PISZEK	2 00	,,								
DIRECTOR	2.00	X						0.	0.	0.
JOHN YENGO	2 00	\ .							0	^
DIRECTOR MARK SOLOMON	2.00	X		_	-	_		0.	0.	0.
DIRECTOR	5.00	x						0.	0.	0
SCOTT HENDRICKSON	3.00	<u> </u>						0.		0.
DIRECTOR	5.00	X						0.	0.	0.
PATRICK WILSON	3.00	122				\vdash		<u> </u>	•	<u>.</u>
DIRECTOR	2.00	x						0.	0.	0.
ARTHUR PINCUS		 								
DIRECTOR	2.00	X						0.	0.	0.
RICK PERKO										
DIRECTOR	2.00	X						0.	0.	0.
MURRAY AUGUST										
TREASURER	5.00			X				0.	0.	0.
***							_			
										-
				_						
							-			

	(A) Name and title	(B) Average		(C) Position					(D) Reportable	(E)			F)
	Name and the	hours	(cl				app	ly)	compensation	Reportable compensation	,		nated unt of
	,	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS0	C)	compe from organ and r	ther ensation in the nization related izations
			ļ	_			ļ						
			_				-	<u>-</u>					
			 							-			
			 				-						
			<u> </u>							· · ·		··· <u>·</u>	
			<u> </u>										
	Total	<u> </u>						l <u>.</u>	70,000.		0.		0
2	Total number of individuals (including but	t not limited to th	nose	liste	d al	oove	e) wł	no re			<u> </u>		
	compensation from the organization												es No
3	Did the organization list any former office line 1a? If "Yes," complete Schedule J for			, ke	y em	plo	yee,	or h	nighest compensated er	nployee on		3	x
4	For any individual listed on line 1a, is the and related organizations greater than \$1	150,000? If "Yes,	," co	mple	ete S	Sche	edule	J f	or such individual	-		4	х
5 	Did any person listed on line 1a receive of the organization? If "Yes," complete School	•			rom	any	unr	elat	ed organization for serv	ices rendered to		5	x
Sec 1	ction B. Independent Contractors Complete this table for your five highest	compensated in	dene	ende	nt c	ontr	racto	ors t	hat received more than	\$100,000 of comm	ensa	tion fro	
	the organization NONE												
	(A) Name and busines	ss address							(B) Description of s	ervices	Со	(C) mpens	ation
													
									· · · · · · · · · · · · · · · · · · ·				
2	Total number of independent contractors \$100,000 in compensation from the orga		ot lii	mıte	d to		se lis	sted	above) who received m	ore than			
	#100,000 in compensation from the orga	. neathor										orm QC	30 (2009

Form 990 Part V		2009) PITCH Statement of Rever	IN FOR	BASEBALL			86-1141	.299 Page 9
		· ·	ide		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
gifts, grants ilar amounts	а	Federated campaigns	1a					
	b	Membership dues	1b					
S'S	С	Fundraising events	1c					
ar a	d	Related organizations	1d					
ξ. <u>Έ</u>	е	Government grants (contribut	ions) 1e					1
اد ا	f	All other contributions, gifts, gran	ts, and					
Contributions, and other simi		similar amounts not included abo	ve 1f	278,937.				
盲	g	Noncash contributions included in lines	1a-1f \$	114,697.				
<u> </u>	h	Total. Add lines 1a-1f		<u> </u>	<u>278,937.</u>		···	
				Business Code				
ဗ္ဗ 2	а							
돌힐	b							
Program Service Revenue	С							
e a	d							
<u> </u>	е							
<u> </u>	f	All other program service reve	nue					
	g	Total, Add lines 2a-2f		•				
3		Investment income (including	dividends, intere	est and	_			ļ
		other similar amounts)		▶	8.			8.
4		Income from investment of ta	x-exempt bond p	oroceeds 🕨				
5		Royalties		•				
			(i) Real	(II) Personal				
		Gross Rents						
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)		•				
7	а	Gross amount from sales of	(i) Securities	(II) Other				
-		assets other than inventory						
	b	Less. cost or other basis						
		and sales expenses						
	С	Gain or (loss)	L	L				
,		Net gain or (loss)						
g 8	а	Gross income from fundraisin						i
e l		including \$						
Other Revenue		contributions reported on line	1c) See					
je		Part IV, line 18	а					
₽		Less. direct expenses	ь	L				
l l		Net income or (loss) from fund	=	<u> </u>				
9	а	Gross income from gaming ac	tivities See					
		Part IV, line 19	а					
		Less direct expenses	b	L				
		Net income or (loss) from gam		>	7.44			
10	а	Gross sales of inventory, less	returns			:		
		and allowances	a					
		Less. cost of goods sold	b					
-	С	Net income or (loss) from sale		D				
-		Miscellaneous Revenu	<u>e</u>	Business Code				
11			-					<u> </u>
	b		-					
	С	All sales services						
		All other revenue						
		Total. Add lines 11a-11d		>	270 245			
932009		Total revenue See instructions.		<u> </u>	278,945.	0.	0.	8 . Form 990 (2009)

Form **990** (2009)

Part IX | Statement of Functional Expenses

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

	All other organizations must complete include amounts reported on lines 6b	(A)	(B)	(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	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	70,991.	70,991.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	54,502.	54,502.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	70,000.	56,000.	10,500.	3,500.
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	1,762.	1,410.	264.	88.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	11,335.	9,068.	1,700.	<u>567.</u>
10	Pāyrūli lāxės	5,740.	4,592.	861.	287.
11	Fees for services (non-employees)				
а	Management				
b	Legal	3,853.	3,853.		
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	5,600.	4,480.	840.	280.
12	Advertising and promotion	570.	570.		
13	Office expenses	2,338.		2,338.	
14	Information technology				
15	Royalties				· · · · · · · · · · · · · · · · · · ·
16	Occupancy	20,440.	20,440.		
17	Travel	3,296.	3,296.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				 -
22	Depreciation, depletion, and amortization	3,388.	1,724.	1,664.	
23	Insurance	1,566.	1,253.	235.	78.
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.)	9,874.	9,874.		
a	POSTAGE AND DELIVERY		5,100.		
b	CONTRACTS TEMPORARY HELD	5,100. 2,536.	5,100.	2 526	
c	TEMPORARY HELP		1,962.	2,536.	
d	SHIPPING SUPPLIES				
e	MEALS & ENTERTAINMENT	1,286. 3,574.	1,286.	172	
f	All other expenses		3,401.	173. 21,111.	4 000
<u>25</u>	Total functional expenses. Add lines 1 through 24f	279,713.	253,802.	<u> </u>	4,800.
26	Joint costs. Check here Jif following				
	SOP 98-2. Complete this line only if the organization	İ			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		13,521.	1	12,224.
	2	Savings and temporary cash investments		3,536.	2	3,544.
	3	Pledges and grants receivable, net	. [,	3	
	4	Accounts receivable, net	· [4	
	5	Receivables from current and former officers, di	rectors, trustees, key			
		employees, and highest compensated employe	· · · · · · · · · · · · · · · · · · ·			
	1	of Schedule L	·		5	
	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)) and persons described in section 495				
		Part II of Schedule L			6	
Ø	7	Notes and loans receivable, net	Ī		7	
Assets	8	Inventories for sale or use	·	80,003.	8	73,541.
As	9	Prepaid expenses and deferred charges	Ţ		9	
	10a		1 1			· · · · · · · · · · · · · · · · · · ·
		basis Complete Part VI of Schedule D	10a 5,240.			
	Ь	Less, accumulated depreciation	10b 4,278.	1,712.	10c	962.
	11	Investments - publicly traded securities		-//	11	
	12	Investments - other securities See Part IV, line	11		12	
	13	Investments - program-related See Part IV, line	——————————————————————————————————————	13		
	14	Intangible assets	· · · · · · · · · · · · · · · · · · ·	4,878.	14	2,238.
	15	Other assets See Part IV, line 11	Ì	0.	15	4,784.
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	103,650.	16	97,293.
	17	Accounts payable and accrued expenses	5,245.	17	<u> </u>	
	18	Grants payable	į	5,225	18	·
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
s	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, director				T
jq.		highest compensated employees, and disqualifi				
Ë		of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate	· · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities Complete Part X of Schedule D		1,731.	25	1,387.
	26	Total liabilities. Add lines 17 through 25	Ī	6,976.	26	1,387.
		Organizations that follow SFAS 117, check he	ere X and complete			
ø		lines 27 through 29, and lines 33 and 34.				
ĕ	27	Unrestricted net assets]	96,674.	27	95,906.
ala	28	Temporarily restricted net assets	Ī		28	
g p	29	Permanently restricted net assets	Ī		29	
Ë		Organizations that do not follow SFAS 117, c	heck here 🕨 🔲 and			·····
P.		complete lines 30 through 34.				
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30		
SSE	31	Paid-in or capital surplus, or land, building, or ed		31		
λt	32	Retained earnings, endowment, accumulated in	· '		32	
ž	33	Total net assets or fund balances	, · · · · · · · · · · · · · · · · · · ·	96,674.	33	95,906.
	34	Total liabilities and net assets/fund balances		103,650.	34	97,293.

97, 293. Form **990** (2009)

Form	990 (2009) PITCH IN FOR BASEBALL 86-114	1299	Pa	ge 1 2
Par	t XI Financial Statements and Reporting			<u></u>
,			Yes	No
1	Accounting method used to prepare the Form 990: Cash Cash Cother MODIFIED CASH			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Х	
b	Were the organization's financial statements audited by an independent accountant?	2b		Х
С	If "Yes" to line 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		Х
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both			
	X Separate hasis Consolidated hasis Roth consolidated and separate hasis			

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2009)

Act and OMB Circular A-133?

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

Open

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

2009

Open to Public Inspection

Name of the organization

PITCH IN FOR BASEBALL Employer identification number 86-1141299

~	T 5	/ D I I: OI				-						
Part I			rity Status (All organiz					tructions				
he orga	anization is not	a private foundatior	because it is (For lines	1 through	11, check	only one b	oox)					
1 🖳	A church, co	nvention of church	es, or association of chur	ches desc	ribed in se	ection 170)(b)(1)(A)(i).				
2	A school des	scribed in section 1	1 70(b)(1)(A)(ii). (Attach Sc	hedule E)								
з 🗀	A hospital of	a cooperative hosp	oital service organization	described	In section	170(b)(1)	(A)(iii).					
4	A medical re	search organization	operated in conjunction	with a hos	pital desci	nbed in se	ection 170)(b)(1)(A)(i	ii). Enter th	e hospital	's nam	ie,
	city, and sta								•	·		•
5	An organizat	ion operated for the	e benefit of a college or u	niversity o	wned or or	perated by	/ a govern	mental un	t describe	d in		
)(b)(1)(A)(ıv). (Comp		, -			, 3					
6 🗀	¬		ment or governmental uni	t docarbo	d in acatia	- 470/b)/	43/63/63					
7 X	7									L 1 - 1		
/ LA	J		ceives a substantial part	or its supp	ort from a	governme	entai unit d	or from the	generai pi	ublic desc	ribea ii	n
	7	(b)(1)(A)(vi). (Compl	•									
8	7		section 170(b)(1)(A)(vi).									
9	→ An organizat	tion that normally re	ceives (1) more than 33	1/3% of its	support f	rom contr	ibutions, n	nembersh	p fees, and	d gross red	eipts t	from
	activities rela	ated to its exempt fo	unctions - subject to certa	aın exceptı	ons, and (2	2) no more	than 33 ⁻	1/3% of its	support fr	rom gross	invest	ment
	income and	unrelated business	taxable income (less sect	tion 511 ta	ıx) from bu	sinesses	acquired b	y the orga	enization af	ter June 3	0, 197	5
	See section	509(a)(2). (Comple	te Part III)									
10 🖳	An organizat	tion organized and o	perated exclusively to te	st for publ	ic safety S	See sec tio	on 509(a)(4	4).				
11 📖	An organizat	ion organized and o	operated exclusively for the	ne benefit	of, to perfo	orm the fu	nctions of	, or to carr	y out the p	urposes o	f one	or
	more publicl	y supported organiz	zations described in secti	on 509(a)(1) or section	on 509(a)(2	2). See se e	ction 509(a)(3). Chec	k the box	that	
			g organization and compl				•	·	,,			
	а 🔲 Туре	ı	Type II	TVP	e III - Func	tionally in	tegrated		d l	Type III - C)ther	
e 🗌	٦ - ١		• •			•	_	r more dis		,,		n
e 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			ritten determination from t		_				J(a)(1) 01 30	500001 505	(4)(2)	
•				uie ino tii	atitis a ty	pe i, rype	in, or type	B 111				
_		organization, check		4			- 6 15 - 6-11		•			
g			organization accepted ar			-						
		=	directly controls, either al	one or tog	etner with	persons o	described	in (ii) and (iii) below,		Yes	No
	_		supported organization?							11g(i)		
		· ·	on described in (i) above?							11g(iı)		
		-	a person described in (i) o							11g(iii)		
h	Provide the	following information	n about the supported or	ganızatıon	(s)							
(i) Nan	ne of supported	(ii) EIN	(iii) Type of organization	(iv) Is the c	organization	(v) Did yo	u notify the	(vi) Is		(vii) Am	ount o	f
	ganization	``	in col. (i) listed in your organization in col. (i) organized in the						Supi			
			(described on lines 1-9 above or IRC section	governing	document?	(i) of you	r support?	`` ~ U.S	.?	,		
			(see instructions))	Yes	No	Yes	No	Yes	No			
		<u></u>					 		 	····		
					İ							
		 		-			 	-	 			
	 	<u> </u>			ļ		<u> </u>		 			
				<u> </u>	ļ		ļ		 			
]]			
otal		1	i	B.	1	I	1	i	1 1			

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.

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.

Pa	art III Support Schedule for	Organizations	Described in	Section 509(a	(Complete onl	y if you checked the be	ox on line 9 of Part I.
Sec	ction A. Public Support						
Cale	endar 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")						
	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						
3	Gross receipts from activities that are not an unrelated trade or bus-					;	
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities			-	 		
_	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5					 	
	Amounts included on lines 1, 2, and					-	
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						
<u>Sec</u>	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support (Add lines 9, 10c, 11, and 12)		ļ				
14	First five years. If the Form 990 is fo	r the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	ation,
	check this box and stop here						<u> </u>
	ction C. Computation of Pub						
15	Public support percentage for 2009 ((line 8, column (f) d	livided by line 13,	column (f))		15	%
	Public support percentage from 2008					16	%
Sec	ction D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20	009 (line 10c, colui	mn (f) divided by li	ne 13, column (f))		17	<u>%</u>
18						18	%
19a	a 33 1/3% support tests - 2009. If the						7 is not
b	more than 33 1/3%, check this box a 33 1/3% support tests - 2008. If the	•					▶ ∟ land
	line 18 is not more than 33 1/3%, cho	eck this box and st	t op here. The orga	ınızatıon qualifies a	as a publicly supp	orted organization	ightharpoons
20	Private foundation. If the organization					•	

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Name of the organization Employer
PITCH IN FOR BASEBALL 8

Employer identification number 86-1141299

Par	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(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 (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	vriting that the assets held in donor adv	sed funds
Ū	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor ac	_	e used only
Ū	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?	action during it for the daily out of purpose	Yes No
Par		anization answered "Yes" to Form 990.	
1	Purpose(s) of conservation easements held by the organization	······································	
•	Preservation of land for public use (e.g., recreation or pl	·	storically important land area
	Protection of natural habitat	<u></u>	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form	of a conservation easement on the last
_	day of the tax year		
	day of the tax you.		Held at the End of the Tax 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 stru	ucture included in (a)	2c
ď	Number of conservation easements included in (c) acquired a		2d
3	Number of conservation easements modified, transferred, rele		
•	year ▶	,	
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the peri		
Ŭ	violations, and enforcement of the conservation easements it	- · · · · · · · · · · · · · · · · · · ·	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above		
•	and section 170(h)(4)(B)(ii)?	,	Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expens	se statement, and balance sheet, and
_	include, if applicable, the text of the footnote to the organizat		
	conservation easements		
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or (Other Similar Assets.
	Complete if the organization answered "Yes" to Form 9	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116, not	t to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of p	ublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these if	tems	
þ	If the organization elected, as permitted under SFAS 116, to i	report in its revenue statement and bala	nce sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, or	r research in furtherance of public service	ce, 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 trea	asures, or other similar assets for financ	
	the following amounts required to be reported under SFAS 13	16 relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		► \$ ► \$

		N FOR BASE				<u>_</u> _				9 Page 2
Par	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures,	or Othe	er Simil	ar Asse	ts (cont	ınued)
3	Using the organization's acquisition, access	ion, and other record	ds, chec	k any of the	following that	at are a s	ignificant	use of its	collection	n items
	(check all that apply)									
а	Public exhibition	C			hange progr	ams				
b	Scholarly research	•	•	Other						
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and expla	ın how tl	hey further t	he organizat	ion's exe	mpt purp	ose in Par	t XIV	
5	During the year, did the organization solicit of	or receive donations	of art, h	istorical trea	sures, or oth	ner sımılaı	r assets			
	to be sold to raise funds rather than to be m								Yes	No_
Pai	t IV Escrow and Custodial Arran		lete if org	ganızatıon aı	nswered "Ye	s" to For	m 990, Pa	art IV, line	9, or	
	reported an amount on Form 990, Pa	rt X, line 21								
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	ns or other as	ssets not	ıncluded		_	
	on Form 990, Part X?							<u> </u>	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table			,			
									Amount	<u> </u>
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance									
2a	Did the organization include an amount on F	orm 990, Part X, line	21?						Yes	☐ No
	If "Yes," explain the arrangement in Part XIV									
Par	t V Endowment Funds. Complete	f the organization ar	nswered	"Yes" to Fo						
		(a) Current year	(b) H	rior year	(c) Two yea	irs back	(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions		ļ							
С	Net investment earnings, gains, and losses									
d	Grants or scholarships							,		
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance		<u> </u>							
2	Provide the estimated percentage of the year	r end balance held a	as							
а	Board designated or quasi-endowment		_%							
þ	Permanent endowment	%								
С	Term endowment	%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	nd administe	ered for th	he organiz	ation	-	
	by									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ıi)	
b	If "Yes" to 3a(II), are the related organizations	s listed as required o	on Sched	dule R?					3b	
4	Describe in Part XIV the intended uses of the						· · · · ·	-		
Par	t VI Investments - Land, Building	1		1	•	10		· · ·		
	Description of investment	(a) Cost or o			or other		ccumulate	ed	(d) Book	k value
		basis (investr	ment)	basis	(other)	dep	preciation			
	Land									
	Buildings									
	Leasehold improvements				2 027		2 2			
	Equipment				3,837.		3,2			619.
	Other			<u></u>	1,403.	L	1,0	PO -		343.
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colur	nn (B), line 1	0(c))					962.

Schedule D (Form 990) 2009 PITCH IN F	OR BASEBALL		86-	1141299 Page 3
Part VII Investments - Other Securities.	See Form 990, Part X, I	ine 12		
(a) Description of security or category	(b) Book value		(c) Method of valuation	
(including name of security)	(5) 55011 1210	Co	st or end-of-year marke	et value
Financial derivatives				
Closely-held equity interests				
Other				· · · · · · · · · · · · · · · · · · ·
				<u> </u>
	+			<u>-</u>
	-	·		
				
	 			
				
1-24			 	·····
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶				
Part VIII Investments - Program Related.	See Form 990, Part X,	line 13		
(a) Description of investment type			(c) Method of valuati	on
(a) Description of investment type	(b) Book value	Co	st or end-of-year marke	et value
				· · · · · · · · · · · · · · · · · · ·
				
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, III	ne 15			
(4	a) Description			(b) Book value
A sub-land to the sub-land to				·····
				
				
		· · · · · · · · · · · · · · · · · · ·		
				· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) must equal Form 990, Part X, col (B) li			>	
Part X Other Liabilities. See Form 990, Part 2	X, line 25			···
1 (a) Description of liability		(b) Amount		
Federal income taxes				
PAYROLL TAXES PAYABLE		1,387.		
			1	
			1	
W. J. J. J. J. J. J. J. J. J. J. J. J. J.			1	
			1	
			1	
		<u> </u>	1	
			{	
			-	
		4 00=	-	
Total. (Column (b) must equal Form 990, Part X, col (B) In	ne 25) >	1,387.	L	

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

	dule D (Form 990) 2009 PITCH IN FOR BASEBALL				<u> 141299</u>	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to A	Audited Fina	ncial 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			
4	Net unrealized gain's (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV)		8			
9	Total adjustments (net) Add lines 4 through 8		9			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		10)-A		
·	t XII Reconciliation of Revenue per Audited Financial Statemen	its with neve	enue per r	T		
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	0-				
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		┦_ ┃		
	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 4. 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-		
b	Other (Describe in Part XIV) Add lines 4a and 4b	_ 4b	•	1 4-		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			4c 5		
	t XIII Reconciliation of Expenses per Audited Financial Stateme	nts With Exp	enses per			
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.					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b		1		
С	Other losses	2c		1		
d	Other (Describe in Part XIV)	2d		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					
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 expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5		
Pai	t XIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III,					, Part
X, lını	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also comple	ete this part to pr	rovide any ad	ditional inf	ormation	
			.			
						

Schedule F (Form 990)

Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Schedule F (Form 990) 2009

DIMON THE HOD DAGED	***				06 114100	0
PITCH IN FOR BASEB. Part I General Informati	ALL on on Activiti	es Outside t	ne United States. Co	molete if the organ	86-114129	9 (00"
to Form 990, Part IV, lin		oo oatsiac ti	ne office otates.	implete il trie organ	ization answered h	es
1 For grantmakers. Does the or		n records to sub	stantiate the amount of th	ne grants or assista	ince, the	
grantees' eligibility for the gran				=		Yes No
2 For grantmakers. Describe in	Part IV the organi	zation's procedu	ires for monitoring the use	of grant funds out	side the United Stat	es
		20) 5 11.				
3 Activities per Region (Use Sch (a) Region (b) Ni	umber of (c) Nur		space is needed) stivities conducted in regio	n (a) If activ	rity listed in (d)	(f) Total
	ffices employ	1 ' '	y type) (i e , fundraising,	1 '	gram service,	expenditures
ın the	e region ager		ogram services, grants to		specific type	for region
	reg	ion recip	ients located in the region) of servic	e(s) in region	
					. 341	
	}			BASEBALL EQ	UIPMENT GIVEN	
CENTRAL				TO NEEDY/TR	AGEDY	
AMERICA/CARIBBEAN	15	0 PROGRA	M SERVICES	STRICKEN AR	EAS	14,343.
		l		L		
				_	UIPMENT GIVEN	
EAST ASIA/PACIFIC	4	0 PROGRA	M SERVICES	TO NEEDY/TR STRICKEN AR		1,278.
			DIRVICIO	DIMIGRALIA THE	2110	1,270.
				BASEBALL EQ	UIPMENT GIVEN	
				TO NEEDY/TR	AGEDY	
EUROPE	9	0 PROGRA	M SERVICES	STRICKEN AR	EAS	6,885.
	}				UIPMENT GIVEN	
47777 716F	ا	0 550055	., annurana	TO NEEDY/TR		
MIDDLE EAST	5	0 PROGRA	M SERVICES	STRICKEN AR	EAS	2,940,
				BASEBALL EO	UIPMENT GIVEN	
				TO NEEDY/TR		
NORTH AMERICA	2	0 PROGRA	M SERVICES	STRICKEN AR	EAS	5,060.
					UIPMENT GIVEN	
		_		TO NEEDY/TR		
SOUTH AMERICA	7	0 PROGRA	M SERVICES	STRICKEN AR	EAS	14,919.
				RACEBATT FO	UIPMENT GIVEN	
				TO NEEDY/TR		
AFRICA	6	0 PROGRA	M SERVICES	STRICKEN AR		9,077.
						3,011.
			· · · · · · · · · · · · · · · · · · ·			····
Totals	48	0				54,502.

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

PITCH IN FOR BASEBALL

Schedule F (Form 990) 2009

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any

(i) Method of valuation (book, FMV, appraisal, other) × A (h) Description of non-cash assistance (g) Amount of non-cash assistance Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by of cash grant cash disbursement (f) Manner of (e) Amount recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 (d) Purpose of grant Use Schedule F-1 (Form 990) if additional space is needed (c) Region (b) IRS code section and EIN (if applicable) (a) Name of organization 0

the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entitles

က

Schedule F (Form 990) 2009

86-1141299

Page 3

PITCH IN FOR BASEBALL

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16
Use Schedule F-1 (Form 990) if additional space is needed Schedule F (Form 990) 2009

OD OD OD OD OD OD OD OD OD OD OD OD OD O	(c) Number of (d) Amount of (e) Manner of recipients cash grant cash grant cash grant assistance recipients assistance as					
	(a) Type of grant or assistance					

Schedule F (Form 990) 2009

Schedule F (Form 990) 2009 FITCH IN FUR BASEBALL 86-1141299 Page 4
Part IV Supplemental Information Complete this part to provide the information required in Part I, line 2, and any additional information
SCHEDULE F, PART I, LINE 2: MONITORING IS PERFORMED VIA CORRESPONDANCE
WITH RECEIPIENT ORGANIZATIONS THAT THE BASEBALL EQUIPMENT WAS RECEIVED
AND USED BY THE ORGANIZATION TO DISTRIBUTE TO NEEDY CHILDREN
SCHEDULE F, PART I, LINE 3: EXPENDITURES ARE ACCOUNTED FOR VIA PHYSICAL
COUNT RECORDS OF EQUIPMENT SHIPPED TO EACH RECEIVING ORGANIZATION AND THE
ALLOCATED INVENTORY VALUE OF EACH SHIPMENT IS CALCULATED

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public Inspection

OMB No 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

Name of the organization	ָ בַּנְיָּהְ בַּנְיָהְ	H H					Employer identification number
Part General Information on Grants and Assistance	FILT IN FOR BASEBALL ation on Grants and Assistance	אחם					CC31#11 00
1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection	to substantiate the	amount of the grants	s or assistance, the	grantees' eligibilit	y for the grants or ass	sstance, and the select	
criteria used to award the grants or assistance?	stance?						X Yes
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for moni	oring the use of grant	t funds in the Unite	d States			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments and	d Organizations in th	e United States.	complete if the org	anization answered "\	(es" to Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	of grant ance
2 Enter total number of section 501(c)(3) and government organizations	and government or	ganizations					
۱,	ction Act Notice	see the Instructions	for Form 990				Schedule I (Form 990) 2006

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	de the information	required in Part I, I	ine 2, and any other	additional information	
SCHEDULE I, PART I, LINE 2: MONITORING	IS	PERFORMED	VIA CORRES	PERFORMED VIA CORRESPONDANCE WITH	
RECEIPIENT ORGANIZATIONS THAT THE	BASEBALL	EQUIPMENT	WAS RECEL	BASEBALL EQUIPMENT WAS RECEIVED AND USED	
BY THE ORGANIZATION TO DISTRIBUTE	TO NEEDY	CHILDREN			

SCHEDULE M (Form 990)

Noncash Contributions

➤ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

2009

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

Open to Public Inspection

Employer identification number

Schedule M (Form 990) 2009

	PITCH IN FOR	BASEB	ALL		86-1	1141	.299	J
Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d Method of d reven	etermi	ning	
1	Art - Works of art			<u></u> .			-	
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications			· "				
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial						_	
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies		-,,					
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► (BASEBALL EQUI)	X	110	114,697.	USED VALUE	OF	EQU	IPM
26	Other			·				
27	Other							
28	Other ► (
29	Number of Forms 8283 received by the organic	zation during	g the tax year for c	ontributions				
	for which the organization completed Form 82	83, Part IV, [Donee Acknowledg	gment 29				·
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	ported in Part I, lines 1-28 th	at it must hold for			
	at least three years from the date of the initial of	contribution,	and which is not	required to be used for exen	npt purposes for			
	the entire holding period?					30a	<u> </u>	X
b	If "Yes," describe the arrangement in Part II							ĺ
31	Does the organization have a gift acceptance i	policy that re	equires the review	of any non-standard contrib	utions?	31	<u> </u>	X
32a	Does the organization hire or use third parties	or related or	ganızatıons to solı	cit, process, or sell noncash		1		
	contributions?					32a	<u> </u>	X
b	If "Yes," describe in Part II							
33	If the organization did not report revenues in c	olumn (c) for	a type of property	y for which column (a) is che	cked,			
	describe in Part II.					1	1 1	i

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

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SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization Employer identification number PITCH IN FOR BASEBALL 86-1141299 FORM 990, PART VI, SECTION B, LINE 11: BOARD REVIEWS THE FORM 990 BEFORE IT IS FILED FORM 990, PART VI, SECTION C, LINE 19: ALL GOVERNING DOCUMENTS AND FINANCIAL REPORTS/FILINGS ARE AVAILABLE UPON REQUEST OF THE ORGANIZATION FORM 990, PART XI, LINE 1 MODIFIED CASH METHOD OF ACCOUNTING

						Olda JJU IAGE	10							
Asset	Description of property													
Number	pi	ate aced ervice	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction					
			E & F	IXTUF	ES		<u> </u>							
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5	CELL													
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		01 ₁ 06			16	4,880.		2,358.	976					
	<u>* 990</u>) PA	GE 10	TOTA	L P	ROGRAM SERVIC								
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1	ORGAI	JTZA	TON	COSTS	3									
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			GE 10			ANAGEMENT AND	GENERAL							
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	* GRA	AND	TOTAL	990	PAG									
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6261					#	Current year section 179	(D) - Asset dispos	sed						

Department of the Treasury Internal Revenue Service Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

▶ See separate instructions.

Attach to your tax return.

Business or activity to which this form relates

990

OMB No 1545-0172

Identifying number

PITCH IN FOR BASEBALL FORM 990 PAGE 10 86-1141299 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 Total cost of section 179 property placed in service (see instructions) 800,000. 3 3 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 5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (a) Description of property (c) Elected cost (b) Cost (business use only) 7 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 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 2010 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. Special Depreciation Allowance and Other Depreciation (Do not include listed property) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 14 15 Property subject to section 168(f)(1) election 15 976. 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property) (See instructions.) Section A 748. 17 17 MACRS deductions for assets placed in service in tax years beginning before 2009 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 2009 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and (d) Recovery period (business/investment use only - see instructions) (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction 3-year property 19a 5-year property 7-year property C 10-year property 15-year property 20-year property S/L 25 yrs 25-year property 27 5 yrs. MM S/L Residential rental property h мм S/L 27.5 yrs MM S/I 39 yrs Nonresidential real property i мм S/L Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life 12-year 12 yrs. b S/L 40-year 40 yrs. MM S/L 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. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 1,724. 23 For assets shown above and placed in service during the current year, enter the

23

portion of the basis attributable to section 263A costs

Listed Property (include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment of celebration, or anuisaments on a substitution of the standed misegine perit or deducting lesse expenses, complete only 24a, 24b, columns (a)	₹orm 456		PIT	CH IN F	OR E	BASEE	BALL							-1141		
Note: For any which for which you are using the standard mileage rate or discluting lease expanse, completently \$42, 24b, columns (a) through (a) of Section A. Depreciation and Other Information (Caution: See the structions for limits for passenger automobiles) Section A. Depreciation and Other Information (Caution: See the structions for limits for passenger automobiles) 249, 9 you have developed to support this boarse/first structure (Caution: See the structions for limits for passenger automobiles) 249, 19, 19, 19, 19, 19, 19, 19, 19, 19, 1	Part V	Listed Propert	ty (Include a	utomobiles, ce	rtaın otl	her vehi	cles, cel	lular tele	phone	s, certain	comput	ers, and	propert	y used f	or entert	ainmen
Section A Depreciation and Other Information (Cautions: See the instructions for Interfer for passenger automatics) 4 (a) Doys have wellowed to support the business/switched used property placed in property (list wholes first) 1 (b) (c) (d) (d) (d) (d) (e) (d) (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e		Note: For any v	ehicle for wi	hich you are us	sing the and Sec	standar	d mileag f applica	ge rate o	r dedu	cting lease	e expens	se, comp	oleteonl	y 24a, 24	4b, colur	nns (a)
(g) (b) (c) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g									ınstruc	tions for l	imits for	passen	ger auto	mobiles))	
(g) Cost or Type of property (c) Extraction of the Personal Cost or Special Service (c) Extraction of the Personal Cost or Special Service (c) Extracting (c	24a Doy	ou have evidence to s	support the bu	ısıness/investme	nt use cl	aimed?	Y	es [No	24b If "Y	es," is ti	ne evide	nce writ	tten?	Yes	No
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 25 Property used more than 50% in a qualified business use 36 Property used more than 50% in a qualified business use 36 Property used 50% or less in a qualified business use 36 Sk Sk Sk Sk Sk Sk Sk Sk Sk Sk Sk Sk Sk		e of property	Date placed in	Business/ investment	ie of	Cost or	Ba	(e) sis for depr isiness/inve	eciation estment	(f) Recovery	Me	(g) thod/	Depr	(h) eciation	Ele	(i) ected on 179
used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use 27 Property used 50% or less in a qualified business use 28 Section 1	25 Spec	ial depreciation allo	·	<u> </u>	<u> </u>	, placed	ID COD!			av voor or	J		 		 	USI
86 Property used more than 50% on a qualified business use 1					Jiopeit	y piaced	III SCIVI	ce during	<i>y</i> (11 0 (4	ax year ar	iu	25				
State Stat					ess use							25			<u> </u>	
27 Property used 50% or less in a qualified business use 9k	20												 	-		
27 Property used 50% or less in a qualified business use				1										-	 	
1 1 28 1 29 29 29 29 29 29 29				t									· · · · ·			
96 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 (h), lines 26 through 27 Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole propnetor, partner, or other "more than 5% owner," or related person for vount of 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 hose vehicles 30 Total business/investiment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year 22 Total other personal (noncommuting) miles driven 31 Total miles driven during the year Add lines 30 through 32 32 Was the vehicle available for personal use during officially hours? 33 Was the vehicle available for personal use during officially hours? 34 Was the vehicle available for personal use during officially hours? 35 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, 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? 30 Do you treat all use of vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 30 Do you treat all use of vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 30 Do you treat all use of vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 30 Do y	27 Prope	erty used 50% or le	ess in a quali	•						<u>'</u>					.1	
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (h), lines 26 Enter here and on line 7, page 1 29 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 for 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 hose vehicles 10 Total business/investment miles driven during the year (do not include commuting miles) 11 Total commuting miles driven during the year (and ont include commuting) miles driven during the year (do not include commuting) miles driven during the year (Add lines 30 through 32 13 Total other personal (noncommuting) miles driven during the year Add lines 30 through 32 14 Was the vehicle available for personal use during off-duty hours? 15 Was the vehicle available for personal use during off-duty hours? 16 Is another vehicle available for personal use and the vehicle seed by employees who are not more than 5% owners or related persons 17 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 18 Do you trail all use of vehicles by employees as personal use? 19 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and etain the information received? 10 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and etain the information received? 10 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and etain the information received? 19 Do you read all use of vehicles by employees as personal use? 10 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and etain t				9	6						S/L·		1			
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