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990 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)

OMB No 1545-0047

2009

| | | the Treasury, * | 4 | The organization may have to use a copy of this return to satisfy state repo | orting requirem | nents | Open to Public |
|---------------|----------------|-------------------------------|----------------------|--|------------------------|---------------|---------------------------------------|
| | | | ar year, or | tax year beginning 12-31 , 2009, and en | | | -30 ,20 10 |
| | | pplicable | Please | C Name of organization PETERSBURG LITTLE LEAGUE | - | | Employer identification no. |
| \neg | ddress c | | use IRS | Doing Business As | | | 52-1278807 |
| = | ame cha | | label or print or | Number and street (or P O box if mail is not delivered to street address) | Room/suite | E | Telephone number |
| = | itial retur | • | type. See | PO BOX 1577 | | | |
| = | eminate | | Specific | City or town, state or country, and ZIP + 4 | | - (| Gross receipts |
| = | mended | | Instruc- tions | PETERSBURG, AK 99833 | | - 1 | s 15,977 |
| = | | n pending | F Name | and address of principal officer TAMARA EVENS | | | |
| ^ | ppilodilo | in posturing | | OX 1577, PETERSBURG, AK 99833 | H(a) Is this affiliate | a group retu | ım for Yes X No |
| . Т: | av.evem | npt status | X 501(c) (| | | affiliates in | $\overline{}$ |
| | | ▶ N/A | <u> </u> | | if "No," | | t (see instructions) |
| | | | Corporation | Trust Association Other L Year of formation | | State of lega | |
| Pár | | Summar | | That Association Solid P E four or formation | 144 0 | nate of logic | 1 40111010 |
| Ган | | | - | ganization's mission or most significant activities PETERSBURG LI | TTLE LEAGU | UE TEA | CHES BASEBALL. |
| | • | Bilony dood | | | | | |
| A C G | | | | | | | |
| to | | | | | | | |
| ν νe | 2 | Check this b | ox 🕨 🗔 | the organization discontinued its operations or disposed of more than 25% | of its net asse | ets | |
| l r t n | 1 | | | bers of the governing body (Part VI, line 1a) | | 3 | 4 |
| i a | 1 | | • | nt voting members of the governing body (Part VI, line 1b) | | . 4 | 4 |
| Pin Şic | | | - | | 1 | . 5 | 0 |
| è | | | • | eers (estimate if necessary) · · · · · · · · · · · · · · · · · · · | 1 | 6 | |
| , | | | | pusiness revenue from Part VIII, column (C), line 12 | <u> </u> | 7a | 0 |
| , 1 | | • | | s taxable income from Form 990-T, line 3 | <u> </u> | 7b | 0 |
| | ~ | rict diliciate | | | Y Prior Yea | | Current Year |
| _ R | 8 | Contribution | e and drai | جَا لِــــــــــــــــــــــــــــــــــــ | FINA | 3,360 | |
| Şe ▼v | | | - | nts (Part VIII, line 1h) | | 481 | |
| Ze e | | • | | art VIII, column (A), lines 3, 4, and 7d) | | | 0 |
| ⊋n u ⊱e | | | | III, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 6,164 | (741) |
| · e ~) | | | | es 8 through 11 (must equal Part VIII, column (A), line 12) | | 10,005 | · · · · · · · · · · · · · · · · · · · |
| <u>≒</u> | + | | | ounts paid (Part IX, column (A), lines 1-3) · · · · · · · · · · · · | | | 0 |
| | 14 | | | members (Part IX, column (A), line 4) | | | 0 |
| E X | l l | • | | nsation, employee benefits (Part IX, column (A), lines 5-10) | | | 0 |
| P | 1 | • | • | ng fees (Part IX, column (A), line 11e) | | | 0 |
| e n | 1 | | | nses (Part IX, column (D), line 25) ▶ 0 | F See Fa | | 松花香菜 |
| s e | 1 | | | IX, column (A), lines 11a-11d, 11f-24f) | | | 14,876 |
| s | 18 | • | • | ines 13-17 (must equal Part IX, column (A), line 25) | | | 14,876 |
| | 19 | • | | es Subtract line 18 from line 12 · · · · · · · · · · · · · · · · · · | | 10,005 | |
| Net | i i | | | | Beginning of Curr | | End of Year |
| Assets | 20 | Total assets | (Part X, Ii | ne 16) | | 29,862 | |
| or Fund | 21 | Total liabilitie | ` ' | , , , , , , , , , , , , , , , , , , , | | 745 | 0 |
| Bal- ances | 22 | Net assets o | r fund bal | ances Subtract line 21 from line 20 · · · · · · · · · · · · · · · | | 29,117 | 16,762 |
| | řílí: | Signatu | re Bloc | <u> </u> | | | |
| | | Under penalti | es of perjury | I declare that I have examined this return, including accompanying schedules and statements, a | nd to the best of m | y knowledg | e |
| | | and belief, it i | s true, correc | nt, and complete Declaration of preparer (other than officer) is based on all information of which p | oreparer has any kr | nowledge | |
| Sign | n | | Ian | nara. Evens | | -+I | 1-30-10 |
| Her | | Signatu | re of officer | | | Da | le |
| | _ | | aw | iara Evens Ireasu | rer | | |
| | | Type or | print name a | | | | |
| | - | Preparer's | | Date Chec | | | entifying number |
| ם | | signature | | O D S self- | oyed ►X | ee instructio | ons) |
| Paid Pren: | arer's | | | 11-11-2010 | | | |
| Use (| | Firm's name | (or voure | CEARMES, CPA, PC | EIN 🕨 | | |
| (| ~, | Firm's name if self-employ | ed), | PO BOX 1258 | | | |
| | | address, and | ZIP + 4 | WRANGELL, AK 99929 | Phone no | 907-87 | 4-2331 |
| May | the IRS | S discuss this | return wi | h the preparer shown above? (see instructions) | | | · · · X Yes No |

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

Form 990 (2009)

| Par | 祝祖 Statement of Program Service Accomplishments | |
|------|---|---------------|
| 1 | Briefly describe the organization's mission | |
| | PETERSBURG LITTLE LEAGUE TEACHES BASEBALL. | |
| | | |
| | | |
| | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on | |
| - | | No |
| | | 140 |
| _ | If "Yes," describe these new services on Schedule O | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program | |
| | | No |
| | If "Yes," describe these changes on Schedule O | |
| 4 | Describe the exempt purpose achievements for each of the organization's three largest program services by expenses | |
| | Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and | |
| | allocations to others, the total expenses, and revenue, if any, for each program service reported | |
| | | |
| 4a | (Code) (Expenses \$ 14,876 including grants of \$) (Revenue \$ | |
| 74 | PETERSBURG YOUTH PLAY BASEBALL. ALL EXPENDITURES ARE FOR FIELDS, EQUIPTMENT, SUPPLIES AND | ′ |
| | TOURNAMENT TRAVEL. | |
| | TOURNAMENT TRAVEL. | |
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| 4b | (Code) (Expenses \$ including grants of \$) (Revenue \$ |) |
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| 4c | (Code) (Expenses \$ including grants of \$) (Revenue \$ | |
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| 4 -4 | Other secures (Describe in Schodule O.) | |
| 4d | Other program services (Describe in Schedule O) | |
| | (Expenses \$ including grants of \$) (Revenue \$) | |
| 4e | Total program service expenses ▶ 14,876 | |

Form 990 (2009) PETERSBURG LITTLE LEAGUE

52-1278807

Page 2

52-1278807

| Par | TIM 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 S'chedule À · · · · · · · · · · · · · · · · · · | | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | | X |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | _ | | |
| | candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete | | | |
| | Schedule C, Part II | 4 | | X |
| 5 | Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) | | | |
| | notice and 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 | | | l |
| | the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," | | | l |
| | complete Schedule D, Part I · · · · · · · · · · · · · · · · · · | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | l |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | Х |
| 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 | | | 1 |
| | 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 | | | |
| | Schedule 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 | | ľ | |
| | 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 | | Х |
| 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 · · · · · · · · · · · · · · · · · · · | | | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | Х |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | Х |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, | | | |
| - | business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I | 14b | | Х |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any | | | <u> </u> |
| | organization or entity located outside the United States? If "Yes," complete Schedule F, Part II | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance | | | |
| | to individuals located outside the United States? If "Yes," complete Schedule F, Part III | 16 | | Х |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services | ·• | <u> </u> | <u> </u> |
| • ′ | on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | | v |
| 10 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | " | | X |
| 18 | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | |
| 10 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | | | X |
| 19 | If "Yes," complete Schedule G, Part III · · · · · · · · · · · · · · · · · | 19 | | v |
| 20 | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | • | - | X |
| 20 | Did the diganization operate one or more hospitals. If Tes, complete schedule 11 | | | $ldsymbol{\Delta}$ |

| Pa | TIV Checklist of Required Schedules (Communical) | | | |
|-----|---|-----|-----|-----------|
| | | | Yes | No |
| 21 | Did the organization report more than \$5,000 of grants and other assistance to governments and organizations | 21 | | v |
| | in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | -21 | | _X |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the | 22 | | v |
| 00 | United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | <u>X</u> |
| 23 | 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 | 23 | | |
| | employees? If "Yes," complete Schedule J | 23 | | X |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than | | | |
| | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines | 240 | | ., |
| | 24b through 24d and complete Schedule K If "No," go to line 25 | 24a | | <u> X</u> |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year | 24- | | |
| | to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction | | | |
| | with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | <u> X</u> |
| b | is the organization 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 | 25b | | X |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or | | | |
| | disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, | | | |
| | substantial contributor, or a grant selection committee member, or to a person related to such an individual? | | | |
| | If "Yes," complete Schedule L, Part III | 27 | | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, | | 1, | |
| | Part IV instructions for applicable filing thresholds, conditions, and exceptions) | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV • • • • • • • • • • • • • • • • • • | 28a | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete | | | |
| | Schedule L, Part IV · · · · · · · · · · · · · · · · · · | 28b | | X |
| C | An entity of which a current or former officer, director, trustee, or key employee of the organization (or a | | | |
| | family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, | | | |
| | Part IV · · · · · · · · · · · · · · · · · · | 28c | | X |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? if "Yes," complete Schedule M | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | |
| | conservation contributions? If "Yes," complete Schedule M | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, | | | |
| | Part I · · · · · · · · · · · · · · · · · · | 31 | | 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 · · · · · · · · · · · · · · · · · · | 35 | | X |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related | | | |
| | organization? If "Yes," complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · · | 36 | | 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 | 37 | | Х |
| 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 | 38 | х | |

| Par | र्तरे⊠ 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 | | | |
| b | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0 | | | |
| C | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable | | | |
| | gaming (gambling) winnings to prize winners? | 1c | X | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | | } | |
| | Statements, filed for the calendar year ending with or within the year covered by this return · · · · · · 2a 0 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? • • • • • • • • • • • • • • • • • • • | 2b | | <u>X</u> |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see | | | |
| | instructions) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by | | | |
| | this return? · · · · · · · · · · · · · · · · · · · | 3a | Х | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O · · · · · · · · · · · · · · · · · · | 3b_ | X | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority | ŀ | | |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other financial | | | |
| | account)? · · · · · · · · · · · · · · · · · · · | 4a | | <u>X</u> |
| b | If "Yes," enter the name of the foreign country | | | |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank | | | |
| | and Financial Accounts | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | X |
| С | If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding | | | |
| | Prohibited Tax Shelter Transaction? | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | |
| | organization solicit any contributions that were not tax deductible? | 6a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or | | | |
| | gifts were not tax deductible? • • • • • • • • • • • • • • • • • • • | 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 | | X |
| 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 | | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year • • • • • • • • • • • • • 7d | - | | |
| е | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal | | | |
| | benefit contract? | 7e | ļ | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | ļ | X |
| g | For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | X |
| h | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as | | | |
| | required? · · · · · · · · · · · · · · · · · · · | 7h | | X |
| 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 | | X |
| 9 | Sponsoring organizations maintaining donor advised funds. | | ļ | |
| а | Did the organization make any taxable distributions under section 4966? | | ļ | X |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | X |
| 10 | Section 501(c)(7) organizations. Enter | | | |
| 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 · · · · · · · 10b | - | | |
| 11 | Section 501(c)(12) organizations. Enter | | | |
| а | Gross income from members or shareholders · · · · · · · · · · · · · · · · · · · | - | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against | | | |
| | amounts due or received from them) · · · · · · · · · · · · · · · · · · | 10 | į. | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| h | If "Yes" enter the amount of tax-exempt interest received or accrued during the year | | | |

Penal VII

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

| <u>Sec</u> | 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 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | Ţ | | |
| _ | any other officer, director, trustee, or key employee? | 2 | | <u> X</u> |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct | | | |
| | supervision of officers, directors or trustees, or key employees to a management company or other person? | 3 | | <u>X</u> |
| 4 | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? • • • • • • | 4_ | | <u> X</u> |
| 5 | Did the organization become aware during the year of a material diversion of the organization's assets? | 5 | | <u>X</u> |
| 6 | Does the organization have members or stockholders? | 6 | | <u>X</u> |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members | | [| |
| | of the governing body? • • • • • • • • • • • • • • • • • • • | 7a | | <u>_X</u> |
| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | 7b | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | | | |
| | the year by the following | | | |
| а | The governing body? • • • • • • • • • • • • • • • • • • • | 8a | <u>X</u> | |
| b | Each committee with authority to act on behalf of the governing body? • • • • • • • • • • • • • • • • • • • | 8b | X | |
| 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 | | Х |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal | | | |
| Reve | nue Code) | | | |
| | | | Yes | No |
| 10a | 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, | | ŀ | |
| | 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 | Χ_ | |
| 11a | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | | |
| 12a | Does the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | | X |
| b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give | | | |
| | rise to conflicts? | 12b | | |
| C | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | | | |
| | describe in Schedule O how this is done | 12c | | |
| 13 | Does the organization have a written whistleblower policy? | 13 | | Х |
| 14 | Does the organization have a written document retention and destruction policy? | 14 | | Х |
| 15 | Did the process for determining compensation of the following persons include a review and approval by | | | |
| | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | | X |
| þ | Other officers or key employees of the organization | 15b | | X |
| | 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 taxable entity during the year? | 16a | | X |
| b | 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 AK | | | |
| 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 for public inspection. Indicate how you make these available. Check all that apply | | | |
| | Own website Another's website X Upon request | | | |
| 19 | Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest | | | |
| | policy, and financial 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 TAMARA EVENS (907) 772-4853 | | | |
| | PO BOX 886 PETERSBURG, AK 99833 | | | |

Page 7

PartVII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

| Name and Title | Average hours per week | 1 4 4 | | | all th | at apply) | | Reportable | Reportable | Estimated | |
|--------------------|------------------------------|------------------------------|----------------|----------|--------------|---------------------------|--------|-----------------------------|--|--|--|
| | | nrure du secude or a o | nst et ut onal | Officer | Key employee | Homploye ghense ted | Former | compensation from the | compensation from related organizations (W-2/1099-MISC) | amount of other compensation from the organization and related organizations | |
| UANE BELL | | | | | | | | | | | |
| RESIDENT | 5.00 | X | | X | 1 | | | c | 0 | | |
| AMARA EVENS | | | | | | | | | | | |
| ECRETARY TREASURER | 2.00 | X | | x | 1 | | | c | 0 | (| |
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Page 8

| Parí | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) | | | | | | | | | | |
|------|--|-------------------|--------------|----------|----------|--|--|--|---------------------------------|------------------------------|---------------------------------------|
| , | (A) | (B) | | | (6 | C) | | | (D) | (E) | (F) |
| | Name and Title | Average | Posit | ion (c | heck | all th | at apply) | _ | Reportable | Reportable | Estimated |
| | 1 1 | hours per week | l t d | | | K | H c e | F | compensation from | compensation from related | amount of other |
| | • | WCCA | dur ı s e | s u | f | У | g mp h p i | r m | the | organizations | compensation |
| | | | v t c | l t | C | e m | e e o s n y | e r | organization (W-2/1099-MISC) | (W-2/1099-MISC) | from the organization |
| | | | d e o | uе | ř | P | t s e a e | | (VV-2/1099-WIISC) | | and related |
| | | | a o I r | 0 | i | y e | t e | | | | organizations |
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| 1b T | otal · · · · · · · · · · · · · · · · · · · | | • • • | ٠. | • • | • • | • • • | | (| 0 | 0 |
| | otal number of individuals (including but not limited to | those listed | above | e) w | ho r | ecei | ved m | ore t | than \$100,000 in | t | <u> </u> |
| | eportable compensation from the organization | | | | | | | | | 0 | |
| | | | | | | | | | | | Yes No |
| 3 [| old the organization list any former officer, director or | trustee, key | emplo | yee, | or h | nighe | est cor | npei | nsated | | |
| е | mployee on line 1a? If "Yes," complete Schedule J fo | r such indivi | dual | • • | | | • • • | • • | | | 3 X |
| | or any individual listed on line 1a, is the sum of repor | | | | | | | | | | |
| | ne organization and related organizations greater that | | | | | | | | | | |
| | ndividual • • • • • • • • • • • • • • • • • • • | | | | | | | | | | 4 X |
| | old any person listed on line 1a receive or accrue com | | | | | | | | | | |
| | ervices rendered to the organization? If "Yes," comple | ete Schedule | J for | suc | n pe | rson | • • • | • • | | | 5 X |
| Sect | ion B. Independent Contractors | | 1 | | 4 | | | | | <u> </u> | - |
| | 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of | | | | | | | | | | |
| | compensation from the organization | | | | | | | | (B) | | (C) |
| | (A) Name and business address | | | | | | | | (B) Description of s | envices | (C) Compensation |
| | realite and publicess address | | - | ••• | | - | | | Description of s | _ | Compensation |
| | · - · · · · · · · · · · · · · · · · · · | | | | | | - | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | - | | | - | - | | | |
| 2 7 | otal number of independent contractors (including bu | it not limited | to tho | se li | sted | abo | ve) wł | no re | eceived | | |
| r | nore than \$100,000 in compensation from the organiz | ation > | | | | | | | | | |

| Part VIII | | Statement of Revenue | | | | | |
|---------------------|----------|--|---------------|---------------|----------------------|--------------------|------------------------------------|
| | | | | (A) | (B) | (C) | (D) |
| | , | | | Total revenue | Related or exempt | Unrelated business | Revenue excluded from tax |
| , | | The state of the s | | | function revenue | revenue | under sections 512, 513, or 514 |
| | 1a· | Federated campaigns · · · · · · 1a | | • | | | |
| | ь | Membership dues · · · · · · · 1b | 421 | | | | 1 |
| Contri- butions, | С | Fundraising events · · · · · · 1c | | | | | 1 |
| gifts, | d | Related organizations · · · · · · · 1d | | | | | |
| grants | e | Government grants (contributions) 1e | | | | | |
| and other | ٠, | All other contributions, gifts, grants, | | | | | |
| sımıtar | ' | and similar amounts not included above 1f | | | | | |
| amounts | g | Noncash contributions included in lines 1a-1f \$ | | | | | |
| | h | Total. Add lines 1a-1f · · · · · · · · · · · · · · · · · · · | | 421 | | | |
| | - | | Business Code | | | | 1 |
| | 2a | REGISTRATION | 900099 | 2,841 | 2,841 | | |
| | ь | | | | | | |
| Program Seeding | c | | | | | · · · · - · | |
| Service Revenue | d | | | | | | |
| | e | | | | | | |
| | f | All other program service revenue • • • • • • | | . = | | - | |
| | I | Total. Add lines 2a-2f | | 2,841 | | | |
| | 3 | Investment income (including dividends, interest, a | nd | | | | |
| | _ | other similar amounts) | • • • • • ▶ | | | | |
| | 4 | Income from investment of tax-exempt bond proceed | eds · · · ▶ | | | | |
| | 5 | Royalties • • • • • • • • • • • • • • • • • • • | • • • • • • • | | | | |
| | | (ı) Real | (ii) Personal | | | | |
| | 6a | Gross Rents · · · · · · | | | | | |
| | b | Less rental expenses · · · · | | | | | |
| | С | Rental income or (loss) · · · | | | | | |
| | d | Net rental income or (loss) · · · · · · · · · · | • • • • • • | | | | |
| | 7a | Gross amount from sales of (i) Securities | (II) Other | | | | |
| | | assets other than inventory | | | | | i |
| | b | Less cost or other basis | | | | | |
| 0 | | and sales expenses · · · · | | | | | |
| ť | С | Gain or (loss) | | | | | |
| h | d | Net gain or (loss) · · · · · · · · · · · · · · · · · · | • • • • • ▶ | | | | |
| r | 8a | Gross income from fundraising | | | | | |
| _ | | events (not including \$ | | | | | |
| R e | | of contributions reported on line 1c) | | | | | 7 : |
| v | l | See Part IV, line 18 · · · · · · · · a | | | | | |
| e n | b | Less direct expenses · · · · · · · b | | | | | |
| ü | С | Net income or (loss) from fundraising events • • | • • • • • ▶ | | | | |
| е | 9a | Gross income from gaming activities | | | | | |
| | | See Part IV, line 19 · · · · · · · · · a | 8,547 | | : | | |
| | | Less direct expenses · · · · · · · b | 8,547 | | | | |
| | С | Net income or (loss) from gaming activities • • • | • • • • • ▶ | | | | |
| | 10a | Gross sales of inventory, less | | | | | |
| | | returns and allowances · · · · · · · · a | 4,168 | | | | |
| | | Less cost of goods sold · · · · · · · b | 4,909 | | | | |
| | <u> </u> | Net income or (loss) from sales of inventory · · · | • • • • • • | (741 |) (741 |) | |
| | <u> </u> | Miscellaneous Revenue | Business Code | | | | |
| | 11a | | | | | | |
| | b | | | | | | |
| | C | | | | | | |
| | 1 | All other revenue | | | | | |
| | | Total. Add lines 11a-11d | | 2,521 | 2,100 | 0 | <u> </u> |
| | 112 | Total revenue. See instructions | 📂 | 2,321 | . ∠,100 | | |

52-1278807

Park 🕅 Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (B) Program service (D) Fundraising Do not include amounts reported on lines 6b, Total expenses Management and 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 · · · · · · · 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) · · · · · Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 10 Fees for services (non-employees) Legal b Lobbying d Professional fundraising services See Part IV, line 17 • Investment management fees · · · · · · · · · · · · f a Advertising and promotion 12 13 14 15 16 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 21 22 Depreciation, depletion, and amortization 23 Insurance 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) 7,573 7,573 LEAGUE CHARTER ADVERTISING AND MISC TOURNAMENT EXPENSES 4,982 4.982 c FIELD 2,016 2,016 d SUPPLIES 305 305 14,876 14,876 0 0 Total functional expenses. Add lines 1 through 24f · · 26 Joint Costs. Check here If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and

| Part | <u>X</u> | Balance Sheet | | | |
|--------------|----------|--|-------------------|-----|-------------|
| | | 1 | (A) | | (B) |
| | | | Beginning of year | | End of year |
| | 1 | Cash - non-interest-bearing | 29,862 | 1 | 16,762 |
| | 2 | Savings and temporary cash investments · · · · · · · · · · · · · · · · · | | 2 | |
| 1 | 3 | Pledges and grants receivable, net | | _3 | |
| | 4 | Accounts receivable, net | | 4 | |
| | 5 | Receivables from current and former officers, directors, trustees, key | | | |
| | | employees, and highest compensated employees. Complete Part II of | | | |
| | | Schedule L · · · · · · · · · · · · · · · · · · | | 5 | |
| | 6 | Receivables from other disqualified persons (as defined under section | | | |
| | | 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete | | | |
| A s | | Part II of Schedule L · · · · · · · · · · · · · · · · · · | | 6 | |
| s | 7 | Notes and loans receivable, net | | 7 | |
| e t | 8 | Inventories for sale or use | | 8 | |
| s | 9 | Prepaid expenses and deferred charges · · · · · · · · · · · · · · · · · · · | | 9 | |
| | 10a | Land, buildings, and equipment cost or | | | , |
| | | other basis Complete Part VI of Schedule D · · · · · 10a | | | 3* ((() |
| | b | Less accumulated depreciation · · · · · · · · · · 10b | | 10c | |
| | 11 | Investments - publicly traded securities · · · · · · · · · · · · · · · · · · · | | 11 | |
| | 12 | Investments - other securities See Part IV, line 11 | | 12 | |
| | 13 | Investments - program-related See Part IV, line 11 · · · · · · · · · · · [| | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets See Part IV, line 11 · · · · · · · · · · · · · · · · · · | | 15 | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 29,862 | 16 | 16,762 |
| | 17 | Accounts payable and accrued expenses | 745 | 17 | |
| | 18 | Grants payable • • • • • • • • • • • • • • • • • • • | | 18 | |
| L | 19 | Deferred revenue · · · · · · · · · · · · · · · · · · · | | 19 | |
| i | 20 | Tax-exempt bond liabilities · · · · · · · · · · · · · · · · · · · | | 20 | |
| a b | 21 | Escrow or custodial account liability Complete Part IV of Schedule D · · · · · · · | | 21 | |
| ! | 22 | Payables to current and former officers, directors, trustees, key | | | 1 |
| | | employees, highest compensated employees, and disqualified | | | |
| t | | persons Complete Part II of Schedule L | | 22 | |
| i e | 23 | Secured mortgages and notes payable to unrelated third parties · · · · · · · | | 23 | |
| s | 24 | Unsecured notes and loans payable to unrelated third parties · · · · · · · · | | 24 | |
| | 25 | Other liabilities Complete Part X of Schedule D · · · · · · · · · · · · · · | | 25 | |
| | 26 | Total liabilities. Add lines 17 through 25 · · · · · · · · · · · · · · · · · · | 745 | 26 | 0 |
| | | Organizations that follow SFAS 117, check here 🕨 💢 and | | | |
| NF | | complete lines 27 through 29, and lines 33 and 34. | | | 1 |
| e u | 27 | Unrestricted net assets | 29,117 | 27 | 16,762 |
| t n | 28 | Temporarily restricted net assets | | 28 | |
| A | 29 | Permanently restricted net assets • • • • • • • • • • • • • • • • • • • | | 29 | |
| s B | | Organizations that do not follow SFAS 117, check here | | | |
| s a e l | | and complete lines 30 through 34. | | | |
| t a | 30 | Capital stock or trust principal, or current funds | | 30 | |
| s n | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| ое | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| r s | 33 | Total net assets or fund balances | 29,117 | 33 | 16,762 |
| | 34 | Total liabilities and net assets/fund balances | . 29,862 | 34 | 16,762 |

| Pa | Financial Statements and Reporting | | | |
|----|--|----|-----|----|
| | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990 X Cash Accrual Other | | | |
| | If the organization changed its methods 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 | | 1 |
| | 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 | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in | | | |
| | the Single Audit Act and OMB Circular A-133? | 3a | | Х |
| 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 | 3b | | |

EEA

Form 990 (2009)

Page 12

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.

▶ Attach to Form 990 or Form 990-EZ.

▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number Name of the organization 52-1278807 PETERSBURG LITTLE LEAGUE Reason for Public Charity Status (All organizations must complete this part) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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 c Type III-Functionally integrated d Type III-Other a Type I b Type II 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) 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 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? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(11) h Provide the following information about the supported organization(s) (a) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of (ii) EIN Name of supported (described on lines 1-9 organization in col organization in col (i) listed in your the organization in support above or IRC section governing document? col (i) of your (i) organized in the support? US? (see instructions)) Yes No No Yes

Total

Schedule A (Form 990 or 990-EZ) 2009

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)

| | tion A. Public Support | | | T " | 1 | T | T |
|-------|--|----------------------|-----------------------|-----------------------|---|----------------|---------------------------------------|
| Calen | dar 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 | | | j | | | |
| | person (other than a governmental unit or | | | | | | i |
| | publicly supported organization) included | | | | | | |
| | on line 1 that exceeds 2% of the amount | | | | i | : | |
| _ | shown on line 11, column (f) | | | | | | |
| 6 | Public support. Subtract line 5 from In 4 | | JL | <u> </u> | | <u> </u> | |
| | tion B. Total Support dar year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 7 | Amounts from line 4 · · · · · · · · · | (=, 2000 | (2, 2000 | (5, 200, | (-, -, -, -, -, -, -, -, -, -, -, -, -, - | 1-7-2300 | (-) |
| 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 o organization, check this box and stop here | rganization's first, | second, third, four | th, or fifth tax year | as a section 501(c |)(3) | ▶□ |
| | tion C. Computation of Public Su | <u>ipport Percer</u> | ntage | | | 1.21 | |
| 14 | Public support percentage for 2009 (line 6, | | | | | | <u>%</u> |
| 15 | Public support percentage from 2008 Sche | | | | | 15 | % |
| 16a | 33 1/3% support test - 2009. If the organiza | | | | 1/3% or more, che | | |
| h | and stop here. The organization qualifies a 33 1/3% support test - 2008. If the organization | | | | | | • • • • • • • • • • • • • • • • • • • |
| b | box and stop here. The organization qualifi | | | | · · · · · · · · · · · · | | ▶□ |
| 17a | 10%-facts-and-circumstances test - 2009. | | | | | | |
| a | more, and if the organization meets the "fac | _ | | | | | |
| | organization meets the "facts-and-circumst | | | | | | ▶□ |
| b | 10%-facts-and-circumstances test - 2008. | | • | • | | | |
| 5 | more, and if the organization meets the "fai | - | | | | | |
| 18 | organization meets the "facts-and-circumst Private foundation. If the organization did i | ances" test. The o | organization qualifie | es as a publicly su | pported organization | on • • • • • • | · · · · · • □ |
| | ······································ | | | | | | |

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I)

| Ser | 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") | 22,025 | 4,292 | 5,502 | | 3,841 | 40,270 |
| 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 | | | · | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or bus under sec 513 | | | | | | |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf · · · · · · · · · · · · · · · · · · · | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | 22,025 | 4,292 | 5,502 | 4,610 | 3,841 | 40,270 |
| 7a | Amounts included on lines 1, 2, and 3 received from disqualified persons · · · · | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year • • • | | | | | | |
| С | Add lines 7a and 7b · · · · · · · · · · · · · · · · · · | | | | | | |
| 8 | Public support (Subtract line 7c from line 6) · · · · · · · · · · · · · · · · · · | | | | | | 40,270 |
| | ction B. Total Support | 1 | | r···. | | | |
| | endar year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 9 | Amounts from line 6 · · · · · · · · · · · · · · · · · · | 22,025 | 4,292 | 5,502 | 4,610 | 3,841 | 40,270 |
| ıua | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | _ | | | |
| | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| | 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 | | | | 1,000 | 7,164 | 8,164 |
| 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) · · · · · · · · · · · · · · · · · · · | | | | | | 48,434 |
| 14 | First five years. If the Form 990 is for the or organization, check this box and stop here | ganızatıon's first, s | econd, third, fourth | , or fifth tax year a | s a section 501(c)(| 3) | ▶ □ |
| <u>Se</u> | ction C. Computation of Public Su Public support percentage for 2009 (line 8, | upport Percen | tage | (f)) · · · · · | | 15 | 83.14 % |
| 16 | Public support percentage from 2008 Scheo | | | | <u></u> | 16 | % |
| <u>Se</u> | ction D. Computation of Investme | | | olumn (f)) | | 17 | 0.00 % |
| 18 | Investment income percentage from 2008 S | | • | | | 18 | % |
| | 33 1/3% support tests - 2009. If the organize 17 is not more than 33 1/3%, check this box | ation did not check and stop here. Th | the box on line 14 e organization qua | , and line 15 is moi lifies as a publicly | re than 33 1/3%, a supported organiz | ation • • • • • | ▶ 🕱 |
| b | 33 1/3% support tests - 2008. If the organization 18 is not more than 33 1/3%, check this | box and stop here | e. The organization | qualifies as a pub | licly supported org | anization · · · | ▶ □ |
| 20 | Private Foundation: If the organization did i | not check a box on | line 14, 19a, or 19 | b, check this box a | ind see instruction: | s | • • • • ▶ 📋 |

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990

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

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990.

Open to Public Inspection

Employer identification number

| PETERSBURG LITTLE LEAGUE | 52-1278807 |
|--|-------------|
| 01. Form 990 governing body review (Part VI, line 11) | |
| EACH BOARD MEMBER READS AND COMMENTS ON FORM 990. | |
| | |
| 02. Governing documents, etc, available to public (Part VI, line 19) | |
| ALL DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC ON REQUEST. | |
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| 990 Name(s) as shown on return | 0 | verflow | Statement | , | FEIN | 2009 Page 1 |
|--------------------------------|--------|---------|---------------|--------|----------|-----------------------|
| PETERSBURG | LEAGUE | | | ··· | <u> </u> | 52-1278807 |
| · | | OTHER | INCOME DETAIL | | | |
| Description GAMING | | | | | \$ | 8,547 |
| GARTINO | ı | | | Total: | \$ | 8,547 |
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