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Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ **Do not enter social security numbers on this form as it may be made public.**
▶ **Information about Form 990-EZ and its instructions is at *www.irs.gov/form990ez*.**

OMB No 1545-1150

2017

Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 07-01-2017 , and ending 06-30-2018

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
CACTUS LEAGUE BASEBALL ASSOCIATION INC

Number and street (or P O box, if mail is not delivered to street address) | Room/suite
16101 NORTH 83RD AVENUE NO 4

City or town, state or province, country, and ZIP or foreign postal code
PEORIA, AZ 85382

D Employer identification number
27-0964454

E Telephone number
(623) 810-1549

F Group Exemption Number ▶

H Check ▶ ☐ if the organization is **not**

Part II **Balance Sheets** (see the instructions for Part II)
Check if the organization used Schedule O to respond to any question in this Part II . . . . . ☑

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	92,738	22	106,847
23 Land and buildings		23	
24 Other assets (describe in Schedule O)	1,500	24	0
25 **Total assets**	94,238	25	106,847
26 **Total liabilities** (describe in Schedule O)	0	26	11,660
27 **Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	94,238	27	95,187

Part III **Statement of Program Service Accomplishments** (see the instructions for Part III)
Check if the organization used Schedule O to respond to any question in this Part III . . ☑

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations, optional for others)

What is the organization's primary exempt purpose?
THE CACTUS LEAGUE BASEBALL ASSOCIATION WAS ORGANIZED TO PROVIDE A FORUM FOR SHARING OPERATIONAL EFFICIENCIES IN COORDINATING AND CONDUCTING ANNUAL MAJOR LEAGUE BASEBALL SPRING TRAINING GAMES, ALSO KNOWN AS CACTUS LEAGUE CACTUS LEAGUE ACTIVITIES HAVE A MAJOR FINANCIAL AND SOCIAL IMPACT ON THE TOURISM INDUSTRY IN MANY CITIES AND TOWNS IN ARIZONA MAJOR GOALS OF THE ASSOCIATION ARE TO ESTABLISH AND NURTURE BUSINESS RELATIONSHIPS WITH MAJOR LEAGUE BASEBALL FRANCHISES THAT CONDUCT PLAYER DEVELOPMENT ACTIVITIES IN ARIZONA, TO VOICE OPINIONS ON LEGISLATIVE ISSUES OF INTEREST TO ASSOCIATION MEMBERS, AND TO FACILITATE AND ENCOURAGE AND PARTICIPATE IN ACTIVITIES DESIGNED TO PROMOTE THE CACTUS LEAGUE THESE ACTIVITIES ARE IMPORTANT AS MAJOR LEAGUE BASEBALL GAMES ARE HELD AT 10 LOCATIONS THROUGHOUT METROPOLITAN PHOENIX IN A WIDELY DISBURSED AREA AND THEY AFFECT THE ECONOMIES OF CITIES, TOWNS AND TRIBES

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28
See Additional Data Table

(Grants $) If this amount includes foreign grants, check here . . . ▶ ☐ **28a**

29 See Additional Data Table

(Grants $) If this amount includes foreign grants, check here . . . ▶ ☐ **29a**

30

(Grants $) If this amount includes foreign grants, check here . . . ▶ ☐ **30a**

31 Other program services (describe in Schedule O) . . . . . .
(Grants $) If this amount includes foreign grants, check here . . . ▶ ☐ **31a**

32 Total program service expenses (add lines 28a through 31a) . . . . . ▶ **32**

Part IV **List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated — see the instructions for Part IV)
Check if the organization used Schedule O to respond to any question in this Part IV. . . . . ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) **(if not paid, enter -0-)**	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
JEFF MEYER PRESIDENT	10 00	0	0	0
CHRIS CALCATERRA VP OF BUS AFFAIRS/TREASURER	4 00	0	0	0
BLAKE ENGLERT VP OF MARKETING & PROMO	2 00	0	0	0
MICHAEL BAILEY VP OF GOVT AFFAIRS	2 00	0	0	0
RYAN LANTZ VP ASSOCIATE MEMBERSHIP	2 00	0	0	0
BILL PUPO VP OF COMM/SECRETARY	2 00	0	0	0

Part V **Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V . . . . . ☑

			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	**33**		No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name Otherwise, explain the change on Schedule O (see instructions)	**34**		No
35a	Did the organization have unrelated business gross income of $1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	**35a**		No
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	**35b**		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	**35c**		No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	**36**		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ **37a** 0			
b	Did the organization file **Form 1120-POL** for this year?	**37b**		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? . .	**38a**		No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . **38b**			
39	Section 501(c)(7) organizations Enter			
a	Initiation fees and capital contributions included on line 9 . . . . . **39a**			
b	Gross receipts, included on line 9, for public use of club facilities **39b**			
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ section 4912 ▶ section 4955 ▶			

[redacted]

		Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46		No

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.
Check if the organization used Schedule O to respond to any question in this Part VI ☐

			Yes	No
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	47		
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		
b	If "Yes," was the related organization a section 527 organization?	49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization If there is none, enter "None "

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

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

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

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over $100,000. ▶

52 Did the organization complete Schedule A? **NOTE.** All Section 501(c)(3) organizations must attach a completed Schedule A ▶ ☐ **Yes** ☐ **No**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** Signature of officer — 2019-01-14 Date

JEFF MEYER PRESIDENT Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
MONICA J STERN CPA		2019-01-14		P00295294

Firm's name ▶ MONICA J STERN CPA PLLC — Firm's EIN ▶ 77-0602105

Firm's address ▶ 11225 NORTH 28TH DRIVE SUITE A100 PHOENIX, AZ 850295608 — Phone no (602) 674-8226

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☑ **Yes** ☐ **No**

Additional Data

Software ID:

Software Version:

EIN: 27-0964454

Name: CACTUS LEAGUE BASEBALL ASSOCIATION INC

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations; optional for others.)	
28 ESTABLISH AND NURTURE BUSINESS RELATIONSHIPS WITH MAJOR LEAGUE BASEBALL FRANCHISES THAT CONDUCT PLAYER DEVELOPMENT ACTIVITIES IN ARIZONA, TO VOICE OPINIONS ON LEGISLATIVE ISSUES OF INTEREST TO ASSOCIATION MEMBERS, AND TO FACILITATE AND ENCOURAGE AND PARTICIPATE IN ACTIVITIES DESIGNED TO PROMOTE THE CACTUS LEAGUE (Grants $ 0) If this amount includes foreign grants, check here . . . ▶ ☐	**28a**	0

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations; optional for others.)	
29 THE ASSOCIATION ALSO HOSTS A LUNCH TO PROMOTE SPRING TRAINING THE LUNCH FEATURES KEYNOTE SPEAKERS WHO ARE CURRENT OR FORMER MAJOR LEAGUE PLAYERS (Grants $ 0) If this amount includes foreign grants, check here . . . ▶ ☐	**29a**	0

TY 2017 Transfers Personal Benefits Contracts Declaration

Name: CACTUS LEAGUE BASEBALL ASSOCIATION INC

EIN: 27-0964454

Declaration: THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY,OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT.THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY,OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
CACTUS LEAGUE BASEBALL ASSOCIATION INC

Employer identification number
27-0964454

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES	DESCRIPTION OFFICE EXPENSES AMOUNT 810 DESCRIPTION WEBSITE AMOUNT 6,918 DESCRIPTIO N INSURANCE AMOUNT 1,780 DESCRIPTION SUPPLIES AMOUNT 13,927 DESCRIPTION CONFERENC E AMOUNT 45,762 DESCRIPTION TRAVEL AMOUNT 350 DESCRIPTION CO-SPONSORSHIP FEES AMO UNT 12,000 TOTAL TO FORM 990-EZ, LINE 16 81,547

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART II, LINE 24 - OTHER ASSETS	DESCRIPTION ACCOUNTS RECEIVABLE BEG OF YEAR AMOUNT 1,500 END OF YEAR AMOUNT 0

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART II, LINE 26 - OTHER LIABILITIES	DESCRIPTION ACCOUNTS PAYABLE BEG OF YEAR AMOUNT 0 END OF YEAR AMOUNT 11,660