

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
▶ Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year may use this form.
▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury
Internal Revenue Service

2006
Open to Public Inspection

A For the **2006** calendar year, or tax year beginning 1-27, **2006**, and ending 9-30, **2006**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization <u>South Beaches Little League</u>	D Employer identification number <u>59-3154028</u>
		Number and street (or P.O. box, if mail is not delivered to street address) Room/suite <u>P.O. Box 33491</u>	E Telephone number <u>(321) 674-0897</u>
		City or town, state or country, and ZIP + 4 <u>Indianapolis, FL 32903-0491</u>	F Group Exemption Number _____

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

G Accounting method Cash Accrual
Other (specify) ▶ _____

I Website: ▶ www.sbill.net
J Organization type (check only one) — 501(c) () (insert no.) 4947(a)(1) or 527

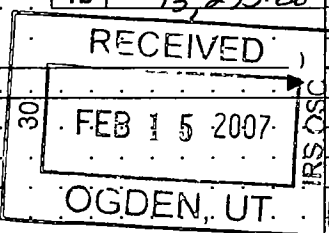
H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

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

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 72,304.32

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 47 of the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	52,832.00
	3	Membership dues and assessments	3	2,282.32
	4	Investment income	4	-
	5a	Gross amount from sale of assets other than inventory	5a	-
	5b	Less: cost or other basis and sales expenses	5b	-
	5c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)	5c	-
	6	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>		
	6a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	-
6b	Less: direct expenses other than fundraising expenses	6b	-	
6c	Net income or (loss) from special events and activities (line 6a less line 6b)	6c	-	
7a	Gross sales of inventory, less returns and allowances	7a	17,190.00	
7b	Less: cost of goods sold	7b	13,235.00	
7c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)	7c	3,955.00	
8	Other revenue (describe ▶ _____)	8	-	
9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	59,069.32	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	-
	11	Benefits paid to or for members	11	-
	12	Salaries, other compensation, and employee benefits	12	-
	13	Professional fees and other payments to independent contractors	13	-
	14	Occupancy, rent, utilities, and maintenance	14	6,000.00
	15	Printing, publications, postage, and shipping	15	480.54
	16	Other expenses (describe ▶ <u>See attached Schedule I</u>)	16	48,398.55
	17	Total expenses (add lines 10 through 16)	17	54,879.09
Net Assets	18	Excess or (deficit) for the year (line 9 less line 17)	18	4,190.23
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	50,845.42
	20	Other changes in net assets or fund balances (attach explanation)	20	-
	21	Net assets or fund balances at end of year (combine lines 18 through 20)	21	55,035.65



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

(See page 51 of the instructions.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	48,119.75	50,549.36
23 Land and buildings	-	-
24 Other assets (describe ▶ _____)	2,725.67	4,486.29
25 Total assets	50,845.42	55,035.65
26 Total liabilities (describe ▶ _____)	-	-
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	50,845.42	55,035.65

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

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Part III Statement of Program Service Accomplishments (See page 51 of the instructions.)

What is the organization's primary exempt purpose? *Recreational Youth Baseball*
 Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

	Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)
28 <i>Organization provides equipment and training for Little League Baseball</i>	28a <i>54,879.09</i>
29	29a
30	30a
31 Other program services (attach schedule)	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 page 52 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
<i>See Attached Sched. 2</i>				

Part V Other Information (Note the statement requirement in General Instruction V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	X
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a		
b Did the organization file Form 1120-POL for this year?	37b	X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	X
b If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved	38b	
39 501(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	

Part V Other Information (Note the statement requirement in General Instruction V.) (Continued)

- 40a** 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:
 section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____
- b** 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation . . .
- c** Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . ▶ _____
- d** Enter amount of tax on line 40c reimbursed by the organization . . . ▶ _____
- e** All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? . . . ▶ _____

	Yes	No
40b		X
40e		X

41 List the states with which a copy of this return is filed. ▶ _____

42a The books are in care of ▶ _____ Telephone no. ▶ (_____) _____
 Located at ▶ _____ ZIP + 4 ▶ _____

- b** At any time during the calendar year, did the organization have over a financial account in a foreign country (such as a bank account)?
 If "Yes," enter the name of the foreign country: ▶ _____
 See the instructions for exceptions and filing requirements for
- c** At any time during the calendar year, did the organization maintain a financial account in a foreign country?
 If "Yes," enter the name of the foreign country: ▶ _____

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 and enter the amount of tax-exempt interest received or accrued during the year: ▶ _____

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, and believe, it is true, correct, and complete. Declaration of preparer (other than the taxpayer) is based on all information of which preparer has any knowledge.

▶ Lisa Bell
 Signature of officer

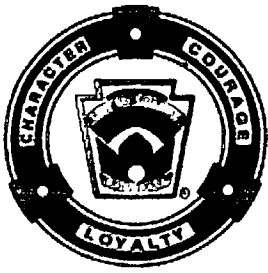
▶ Lisa Bell - Treasurer
 Type or print name and title.

Paid Preparer's Use Only

Preparer's signature ▶ _____

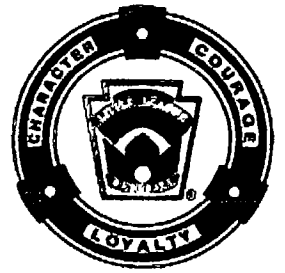
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ _____

Phone no. ▶ (_____) _____



SOUTH BEACHES LITTLE LEAGUE
P.O. BOX 33491
INDIALANTIC, FL 32903
321.953.6052 VOICE

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Form 990 EZ  
Year Ending September 30, 2006  
EIN 59-3154028  
Charter Number 309-02-06

**SCHEDULE 1 ~ OTHER EXPENSES (PAGE 1 LINE 16)**

|                      |                    |
|----------------------|--------------------|
| Charter/Insurance    | \$ 2,656.30        |
| Baseball Equipment   | \$13,495.95        |
| Uniforms             | \$17,215.67        |
| Tournament Fees      | \$ 2,875.00        |
| Misc.                | \$ 772.03          |
| Sales Tax            | \$ 823.60          |
| Umpires              | <u>\$10,560.00</u> |
| Total Other Expenses | <u>\$48,398.55</u> |



**SOUTH BEACHES LITTLE LEAGUE**  
**P.O. BOX 33491**  
**INDIALANTIC, FL 32903**  
**321.953.6052 VOICE**



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Form 990 EZ
 Year Ending September 30, 2006
 EIN 59-3154028
 Charter Number 309-02-06

SCHEDULE 2 ~ LIST OF OFFICERS AND DIRECTORS (PAGE 2 PART IV)

<u>(A) Name and Address*</u>	<u>(B) Title** and Hours per Week</u>	<u>(C)</u>	<u>(D)</u>	<u>(E)</u>
Greg Pinkerton	Director and President (Varies)	\$0	\$0	\$0
Greg Robinson	Director and Vice President (Varies)	\$0	\$0	\$0
Lisa Bell	Director and Treasurer (Varies)	\$0	\$0	\$0
Win Pafias	Director and Vice President (Varies)	\$0	\$0	\$0
John Christiano	Director and Player Agent (Varies)	\$0	\$0	\$0
Ed Mussler	Director and Player Agent (Varies)	\$0	\$0	\$0
Alex Turko	Director and Safety Officer (Varies)	\$0	\$0	\$0
Marie Reed	Director and Player Agent (Varies)	\$0	\$0	\$0
Robert Craft	Director and Player Agent (Varies)	\$0	\$0	\$0
Joe McAllister	Director (Varies)	\$0	\$0	\$0
Sharon Phillips	Director and Secretary (Varies)	\$0	\$0	\$0
Susan Murphy	Director (Varies)	\$0	\$0	\$0

* The address for all of the above is
 c/o South Beaches Little League
 P.O. Box 33491
 Indialantic, FL 32903-0491

** For tax year beginning October 1, 2005 and ending September 30, 2006