

**NEIGHBORHOOD DEVELOPMENT FUND
Not-for-Profit Transmittal and Approval Form**

Applicant/Program: Germantown Baseball, Inc.

Executive Summary of Request:

Germantown Baseball is a premier non-profit little league that exists to to create good character in young people through supervised, competitive athletic games.

The funds requested are to purchase a used bobcat and ten (10) picnic tables to be utilized in the Germantown Baseball complex.

The bobcat will be utilized for preparation and maintenance of the athletic fields and the picnic tables will be used by families that attend games.

0-166-15

Is this program/project a fundraiser? Yes No

Is this applicant a faith based organization? Yes No

Does this application include funding for sub-grantee(s)? Yes No

I have reviewed the attached Neighborhood Development Fund Application and have found it complete and within Metro Council guidelines and request approval of funding in the following amount(s). I have read the organization's statement of public purpose to be furthered by the funds requested and I agree that the public purpose is legitimate. I have also completed the disclosure section below, if required.

10

District #



Council Member Signature

\$30,000.00

Amount

10 July 2015

Date

Primary Sponsor Disclosure

List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

My insurance agent, Rob Holtzmann, is a volunteer and coach at Germantown Baseball.

Approved by:

Appropriations Committee Chairman

Date

Clerk's Office Only:

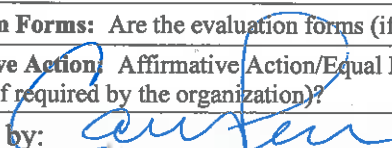
Request Amount: _____

Committee Amended Appropriation: _____

Original Appropriation: _____

Council Amended Appropriation: _____

NDF NON-PROFIT APPLICATION CHECKLIST

Legal Name of Applicant Organization: Germantown Baseball, Inc.	
Program Name: Equipment and seating purchase Request Amount: \$30,000.00	Yes/No/NA
Request form: Is the NDF request form signed by all Council Member(s) appropriating funding?	Yes
Request form: Is the funding proposed less than or equal to the request amount?	Yes
Request form: Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?	Yes
Application Page 1: Has prior Metro funds committed/granted been disclosed?	Yes
Application Page 1: Is the application properly signed and dated by authorized signatory?	Yes
Application Page 3: Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?	n/a
Application Pages 3 – 5: Is the proposed public purpose of the program well-documented?	Yes
Application 4: Is there adequate documentation of how the proceeds of the fundraiser will be spent?	Yes
Application Budget Page 6: Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for “Metro, Non Metro and Total” expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?	Yes
Faith Based Organizations: Is the signed Faith Based Form signed and included?	n/a
Jefferson County Only: Will all funding be spent in Louisville/Jefferson County?	no
Capital Project(s) request: Is the cost estimate(s) from proposed vendor(s) included?	Yes
Good Standing: Is the entity in good standing with: <ul style="list-style-type: none"> • Kentucky Secretary of State – include Secretary of State website information on organization • Louisville Metro Government – check OMB monthly report filed in Council Financial Reports • Internal Revenue Service – most recent Form 990 included 	Yes
Separate Taxing Districts: If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?	n/a
Small Cities: Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)	n/a
Operating Requests: Is recommended operating funding less than or equal to 33% of total operating budget?	n/a
IRS Exempt Proof: Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Yes
Operating Budget: Is the organization’s current fiscal year operating budget included?	Yes
Ordinance Required: Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.	Yes
Board Members: Is the entity’s board member list (with term length/term limits) included?	Yes
Staff: Is a list of the highest paid staff included with their expected annual personnel costs?	Yes
Annual Audit: Is the most recent annual audit (if required by organization) included?	n/a
Rent Requests: Is a copy of signed lease included?	n/a
Articles of Incorporation: Are the Articles of Incorporation of the organization included?	Yes
IRS Form W-9: Is the IRS Form W-9 included?	Yes
Evaluation Forms: Are the evaluation forms (if program participants are given evaluation forms) included?	n/a
Affirmative Action: Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?	n/a
Prepared by: 	Date: 10 July 2015



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization:		Germantown Baseball, Inc.	
<small>(as listed on: http://www.sos.ky.gov/business/records)</small>			
Main Office Street & Mailing Address: 1537 Poplar Level Road Louisville, KY 40217			
Website: www.germantownbaseball.com			
Applicant Contact:	Tim Carpenter	Title:	Treasurer
Phone:	502-592-6431	Email:	tcarpenter@frenchlick.com
Financial Contact:	Tim Carpenter	Title:	Treasurer
Phone:	812-639-9933	Email:	tcarpenter@frenchlick.com
Organization's Representative who attended NDF Training:			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	1537 Poplar Level Road, Louisville, KY 40217		
Council District(s):	10 - Steve Magre	Zip Code(s):	40217
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: equipment purchase & seating purchase			
Total Request: (\$)	30,000.00	Total Metro Award (this program) in previous year: (\$)	0
Purpose of Request (check all that apply):			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input checked="" type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
The Following are Required Attachments:			
<input type="checkbox"/> IRS Exempt Status Determination Letter <input type="checkbox"/> Current Year Projected Budget <input type="checkbox"/> List of Board of Directors (include term & term limits) <input type="checkbox"/> Current financial statement <input type="checkbox"/> Most recent IRS Form 990 or 1120-H <input type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Cost estimates from proposed vendor if request is for capital expense		<input type="checkbox"/> Signed lease if rent costs are being requested <input type="checkbox"/> IRS Form W9 <input type="checkbox"/> Evaluation forms if used in the proposed program <input type="checkbox"/> Annual audit (if required by organization) <input type="checkbox"/> Faith Based Organization Certification Form, if required <input type="checkbox"/> Staff including the 3 highest paid staff	
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.			
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Source:		Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Has the applicant met the BBB Charity Review Standards? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Applicant's Initials *YJC*



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

The objective of Germantown Baseball, Inc. shall be to implant firmly in the boys and girls of the community the ideals of good sportsmanship, honesty, loyalty, courage and respect so that they may be finer, stronger, happier boys and girls and will grow to be good, clean-living and healthy citizens.

The objectives will be achieved by providing supervised (competitive) athletic games. The supervisors shall bear in mind that molding the character of the future citizens is of prime importance and the attainment of exceptional athletic skill or winning of games is secondary.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 4 – PROGRAM/PROJECT NARRATIVE

A: Describe the program/project start and end dates, a description of the program/project and applicable data with regards to specific client population the program will address (attach related flyers, planning minutes, designs, event permits, proposals for services/goods, etc.):

The capital project, if approved, is a back-hoe & seating for Germantown Baseball. Germantown's season runs from March through September and during the season many families enjoy snacks and watching the games from the picnic tables and from the bleachers. The back-hoe will specifically be used for additional ground preparation and maintenance in the off season and during the regular baseball season.

B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s):

The funding will pay for a back-hoe for maintenance / preparation of the fields and grounds and seating will be used by families that attend games.



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

C: If this request is a fundraiser, please detail how the proceeds will be spent:

N/A

D: For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances:

Effective October 24, 2013, reimbursements should not be made unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):

- ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.
- ✓ Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.

N/A

The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:

- ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.

The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.

N/A



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

E: Describe the program's benefits to those being served (measurable outcomes). Include the program's process for collecting data and the indicators that will be tracked to measure the benefits to those being served:
The benefits will be for all children to have a safer and better equipped facility along with the benefit of families being able to enjoy time together at picnic tables and bleachers.

F: Briefly describe any existing collaborative relationships the organization has with other community organizations. Describe what those partners are bringing to the relationship in general and to this program/project specifically.

N/A



LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 5 -- PROGRAM/PROJECT BUDGET SUMMARY

THE PROGRAM/PROJECT BUDGET SHOULD REALISTICALLY ESTIMATE WHAT AMOUNT IS NEEDED FROM METRO GOVERNMENT AND WHAT IS EXPECTED FROM OTHER SOURCES.

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
A: Personnel Costs Including Benefits			
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (Attach Detailed List)			
G: Professional Service Contracts			
H: Program Materials			
I: Community Events & Festivals (Attach Detail List)			
J: Machinery & Equipment			
K: Capital Project	30,000.00	455.17	30,455.17
L: Other Expenses (Attach Detail List)			
*TOTAL PROGRAM/PROJECT FUNDS	30,000.00	455.17	30,455.18
	98.5 %	1.5 %	100%

List funding sources for total program/project costs in Column 2, Non-Metro Funds:

Other State, Federal or Local Government	0
United Way	0
Private Contributions (do not include individual donor names)	0
Fees Collected from Program Participants	0
Other (please specify)	0
	0

*Total of Column 1 MUST match "Total Request on Page 1, Section 2"

**Must equal or exceed total in column 2.

Applicant's Initials 

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Detail of In-Kind Contributions for this PROGRAM only: Includes Volunteers, Space, Utilities, etc. (Include anything not bought with cash revenues of the agency).

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
N/A		
<i>Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)</i>		

*** DONOR INFORMATION REFERS TO WHO MADE THE IN KIND CONTRIBUTION. VOLUNTEERS NEED NOT BE LISTED INDIVIDUALLY, BUT GROUPED TOGETHER ON ONE LINE AS A TOTAL NOTING HOW MANY HOURS PER PERSON PER WEEK**

Agency Fiscal Year Start Date: October 1

Does your Agency anticipate a significant increase or decrease in your budget from the current fiscal year to the budget projected for next fiscal year? NO YES

If YES, please explain:

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 -- CERTIFICATIONS & ASSURANCES

By signing Section 7 of the Grant Application, the authorized official signing for the applicant organization certifies and assures to the best of his or her knowledge and/or belief the following Assurances and Certifications. If there is any reason why one or more of the assurances or certifications listed cannot be certified or assured, please explain in writing and attach to this application.

Standard Assurances

1. Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
2. Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
3. Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
5. The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
6. Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
7. Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end.
8. Applicant understands they must provide proof of all expenditures (canceled checks, receipts, paid invoices). The Applicant understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld or request to be returned if previously disbursed.
9. Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approval date, and will end with June 30 of the fiscal year in which the grant is approved. Expenditures associated with this award expected to occur prior to the award period (approval date) must be disclosed in this application in order to be considered compliant with the grant agreement.
10. Applicant understands if we choose to incur expenditures prior to the approval of the application by the Metro Council, there is no guarantee that funding will be reimbursed, as the Council may choose not to award the application.
11. Applicant understands if the grant agreement is not returned to Louisville Metro within 90 days of its mailing to the applicant, the approval is automatically revoked.


Standard Certifications

1. The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fraternal activities.
2. The Agency has a written Affirmative Action/Equal Opportunity Policy.
3. The Agency does not discriminate in employment or in provision of any service/program/activity/event based on age, color, disabled status, national origin, race, religion, sex, gender identity or sexual orientation, or Vietnam era veteran status.
4. The Agency certifies it will not require clients, recipients, or beneficiaries to participate in religious, political, fraternal or like activities in order to receive services/benefits provided with Louisville Metro Government funds.
5. The Agency understands the Americans with Disabilities Act (ADA) and makes reasonable accommodations.

Relationship Disclosure: List below any relationship you or any member of your Board of Directors or employees has with any Councilperson, Councilperson's family, Councilperson's staff or any Louisville Metro Government employee.

SECTION 7 -- CERTIFICATIONS & ASSURANCES

I certify under the penalty of law the information in this application (including, without limitation, "Certifications and Assurances") is accurate to the best of my knowledge. I am aware my organization will not be eligible for funding if investigation at any time shows falsification. If falsification is shown after funding has been approved, any allocations already received and expended are subject to be repaid. I further certify that I am legally authorized to sign this application for the applying organization and have initialed each page of the application.

Signature of Legal Signatory:		Date:	June 15, 2015
Legal Signatory: (please print):	Tim Carpenter	Title:	Treasurer
Phone:	812-639-9933	Extension:	
Email:	tcarpenter@frenchlick.com		

Internal Revenue Service

Department of the Treasury

District
Director

Baltimore District

31 Hopkins Plaza, Baltimore, Md. 21201
P.O. Box 14163
Baltimore, MD 21203

▷

DATE: JANUARY 26, 1999

GERMANTOWN BASEBALL, INC.
P.O. BOX 17222
LOUISVILLE, KY 40217

Employer Identification Number:
[REDACTED]

Person to Contact:
EP/EO Tax Examiner

Telephone Number:
(410) 962-6058

Dear Sir/Madam:

This is in response to your inquiry requesting a copy of the letter which granted tax exempt status to the above named organization.

Our records show that the organization was granted exemption from Federal income tax under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3) effective AUGUST, 1964. We have also determined that the organization is not a private foundation because it is described in sections 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you under section 170 of the Code.

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

You are required to file Form 990, Return of Organization Exempt From Income Tax, only if your gross receipts each year are normally more than \$25,000. However, if you receive a Form 990 package in the mail, please file the return even if you do not exceed the gross receipts test. If you are not required to file, simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally \$25,000 or less, and sign the return.

A copy of our letter certifying the status of the organization is not available; however, this letter may be used to verify your tax-exempt status.

Because this letter could help resolve any questions about your exempt status, it should be kept in your permanent records.

Sincerely yours,



Paul M. Harrington
District Director

CURRENT YEAR
PROJECTED BUDGET

Germantown Baseball Inc.
2014-2015 Budget

	Budget 2014-2015
Income	
Concession Income	70,673.01
Concession Income-Deposit Fees	4,000.00
Contributions, Gifts, Grants	
Government Grants	0.00
Other Contributions, Gifts, Etc.	1,500.00
Total Contributions, Gifts, Grants	\$ 1,500.00
Fundraising Revenue	
Alumni Game Income	4,287.80
Casino Night Income	501.60
Golf Scramble Income	7,351.30
Picnic Income	16,704.34
Picnic Raffle Income	64,600.00
Total Fundraising Revenue	\$ 93,445.04
Interest Income	10.00
Parents Shirt Income	6,905.55
Picture Income	994.65
Sign-Up Income (Fall)	7,611.40
Sign-Up Income (Spring)	0.00
Sponsor Income	14,069.50
Tournament Gate Income	25,000.00
Tournament Shirt Income	6,000.00
Tournament Sponsor Income	5,000.00
Tournament Uniform Fees	8,000.00
Total Income	\$ 243,209.16
Expenses	
Administrative Expense	2,500.00
Bank Charge Expense	0.00
Capital Improvements Expense	0.00
Concession Expense	37,496.34
Concession Management	6,500.00
Dues and Subscriptions	990.00
Dumpster Expense	2,700.00
Equipment(Playing) Expense	12,009.86
Field Maintenance Expense	
Field Supplies Expense	7,500.00
Gasoline & Diesel Fuel Expense	1,250.00
Mower & Tractor Repairs	2,500.00
Total Field Maintenance Expense	\$ 11,250.00
Fundraising Expenses	
Alumni Game Expense	1,700.00
Golf Scramble Expense	3,500.00
Picnic Expense	7,000.00
Picnic Raffle Prizes	1,500.00
Total Fundraising Expenses	\$ 13,700.00
Groundskeeper Expense	22,680.00
Insurance Expense	16,428.50
Interest Expense	247.78
Licenses and Permits	375.00
Parent Shirt Expense	3,827.08
Postage Expense	250.00
Printing Expense	1,000.00
Program Expense	1,800.00
Property Maintenance Expense	4,000.00
Refund Expense	0.00
Return Check Expense	0.00
Sales Tax Expense	3,659.85
Scorekeeper Expense	4,200.00
Security Expense	1,000.00
Start-up Expense	0.00
Telephone Expense	1,600.00
Tournament Entry Fee Expense	7,800.00
Tournament Shirt Expense	4,000.00
Tournament Ump & Scorer Expense	6,750.00
Tournament Uniform Expense	8,500.00
Travel Expense (Allstate)	6,274.79
Trophy Expense (Reg. Season)	2,000.00
Trophy Expense (Tournaments)	1,500.00
Umpire Expense	18,000.00
Uniform Expense	18,821.28
Utility Expense	21,000.00
Total Expenses	\$ 242,860.46
Net Operating Income	\$ 348.69
Net Income	\$ 348.69

Germantown Baseball Inc. Current Board of Directors

- (a) A President shall be elected for two years by the General Membership at the September election meeting every uneven year. (Arthur McCarty)
- (b) A 1st Vice President shall be elected for two years by the General Membership at the September election meeting every even year. (Tim Pike)
- (c) A 2nd Vice President shall be elected for two years by the General Membership at the September election meeting every uneven year. (JJ Keen)
- (d) A 3rd Vice President shall be elected for two years by the General Membership at the September election meeting every uneven year. (Paul Martin, Jr.)
- (e) An Assistant Vice President of Baseball shall be elected for two years by the General Membership at the September election meeting every uneven year. (Mark Lindsey)
- (f) A Secretary shall be elected for two years by the General Memberships at the September election meeting every even year. (Carrie Schneidtmiller)
- (g) A treasurer shall be elected for two years by the General Membership at the September election meeting every uneven year. (Tim Carpenter)
- (h) A Baseball Player Agent for 9-10 shall be elected for two years by the General Membership at the September election meeting every even year. (Kevin Carpenter)
- (i) A Baseball Player Agent for 11-12 shall be elected for two years by the General Membership at the September election meeting every even year. (Steve Brown)
- (j) A Baseball Player Agent for 13-Over shall be elected for two years by the General Membership at the September election meeting every uneven year. (Wayne Sartin)
- (k) A Softball Player Agent for all ages shall be elected for two years by the General Membership at the September election meeting every even year. (Natalie Bennett)
- (l) A Boy's Machine Pitch Player (Ages 7-8) shall be elected for two years by the General Membership at the September election meeting every uneven year. (Greg Guinn)
- (m) A T-Ball Player Agent for all ages shall be elected for two years by the General Membership at the September election meeting every even year. (Wayne Sweeney)
- (n) Three At Large Members shall be elected for two years by the General Membership at the September election meeting. Two every even year and one every uneven year. (Andy Keen, Keith Ingram, & Kim Ingram)

CURRENT
FINANCIAL
STATEMENT

Germantown Baseball Inc.
Profit and Loss
October 1, 2014 - June 3, 2015

	<u>Total</u>
Income	
Concession Income	30,290.94
Concession Income-Deposit Fees	6,470.00
Contributions, Gifts, Grants	
Other Contributions, Gifts, Etc.	6,987.75
Total Contributions, Gifts, Grants	<u>\$ 6,987.75</u>
Fundraising Revenue	144.93
Alumni Game Income	4,444.00
Casino Night Income	450.00
Golf Scramble Income	320.00
Night at the Bats	860.00
Picnic Income	14,476.12
Picnic Raffle Income	62,079.00
Spirit Wear Income	3,165.50
Total Fundraising Revenue	<u>\$ 85,939.56</u>
Interest Income	5.09
Non Profit Income	25.00
Parents Shirt Income	7,880.50
Picture Income	2,163.00
Sponsor Income	18,170.00
Tournament Fee Income	1,000.00
Tournament Gate Income	1,155.00
Travel Team Income	2,484.75
Uncategorized Income	30.00
Total Income	<u>\$ 162,601.58</u>
Gross Profit	<u>\$ 162,601.58</u>
Expenses	
Administrative Expense	574.24
Bank Charge Expense	69.80
Capital Improvements Expense	4,200.00
Concession Expense	16,945.38
Concession Management	2,800.00
Donations	100.00
Dues and Subscriptions	2,163.10
Dumpster Expense	1,235.62
Equipment(Playing) Expense	7,046.22
Field Maintenance Expense	367.29
Field Supplies Expense	3,646.33
Gasoline & Diesel Fuel Expense	332.59
Mower & Tractor Repairs	2,280.91
Total Field Maintenance Expense	<u>\$ 6,627.12</u>
Fundraising Expenses	
Alumni Game Expense	1,578.00
Golf Scramble Expense	220.00
Night at the Bats	1,280.00
Picnic Expense	5,627.06
Picnic Raffle Prizes	1,500.00
Spirit Wear Expense	2,200.50
Total Fundraising Expenses	<u>\$ 12,405.56</u>
Groundskeeper Expense	7,200.00
Insurance Expense	15,595.00
Licenses and Permits	578.80
Parent Shirt Expense	4,471.50
Postage Expense	454.23
Printing Expense	194.55
Program Expense	1,880.58
Property Maintenance Expense	2,142.96
Refund Expense	969.93
Return Check Expense	457.00
Sales Tax Expense	374.23
Scorekeeper Expense	2,558.50
Security Expense	360.00
Start-up Expense	1,850.00
Telephone Expense	901.27
Tournament Entry Fee Expense	
Travel Team	700.00
Total Tournament Entry Fee Expense	<u>\$ 700.00</u>
Tournament Hosting Expense	4,350.00
Tournament Ump & Scorer Expense	875.00
Umpire Expense	11,864.50
Uniform Expense	11,705.35
Utility Expense	7,006.08
Total Expenses	<u>\$ 130,456.48</u>
Net Operating Income	<u>\$ 32,145.10</u>
Other Expenses	
Other Miscellaneous Expense	101.42
Total Other Expenses	<u>\$ 101.42</u>
Net Other Income	<u>-\$ 101.42</u>
Net Income	<u>\$ 32,043.68</u>

Return of Organization Exempt From Income Tax

2013

Open to Public Inspection

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 and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

A For the 2013 calendar year, or tax year beginning **OCTOBER 1**, 2013, and ending **SEPTEMBER 30**, 2014

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization: **GERMANTOWN BASEBALL INC.**
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
P. O. BOX 32473
 City or town, state or province, country, and ZIP or foreign postal code
LOUISVILLE, KY 40232-2473

D Employer identification number
 [REDACTED]

E Telephone number
502-635-2282

F Name and address of principal officer: **ARTHUR A. McCARTY SR.**
2904 PINDELL AVE. LOUISVILLE, KY 40217

G Gross receipts \$ **266227**

H(a) Is this a group return for subsidiaries? Yes No
H(b) Are all subsidiaries included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () < (insert no.) 4947(a)(1) or 527

J Website: > **www.germantownbaseball.com**

K Form of organization: Corporation Trust Association Other >

L Year of formation: **1952** **M** State of legal domicile: **KY**

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: PROVIDE A COMPLETE BASEBALL, SOFTBALL AND T-BALL PROGRAM FOR OVER 600 BOYS AND GIRLS (AGES 4 TO 16) IN OUR NEIGHBORHOOD.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	16
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	0
	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	0
	6	Total number of volunteers (estimate if necessary)	6	500
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	896	36992
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	72783	96208
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11	9
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	119519	198665
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) >	0	0
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	124690	191908
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	124690	191908
	19	Revenue less expenses. Subtract line 18 from line 12	(5171)	6757
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	11363	11595
	22	Net assets or fund balances. Subtract line 21 from line 20	7006	481
			4357	11114

Part II Signature Block

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: _____ Date: _____

Type or print name and title: _____

Paid Preparer Use Only

Print/type preparer's name: _____ Preparer's signature: _____ Date: _____

Check if self-employed PTIN: _____

Firm's name >: _____ Firm's EIN >: _____

Firm's address >: _____ Phone no.: _____

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

COPY

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

THE OBJECTIVE OF THE ORGANIZATION SHALL BE TO IMPLANT FIRMLY IN THE BOYS AND GIRLS OF THE COMMUNITY THE IDEALS OF GOOD SPORTSMANSHIP, HONESTY, LOYALTY, COURAGE AND RESPECT, SO THAT THEY MAY BE FINER, STRONGER, HAPPIER BOYS AND GIRLS, AND WILL GROW TO BE GOOD, CLEAN-LIVING AND HEALTHIER CITIZENS. THESE OBJECTIVES WILL BE ACHIEVED BY PROVIDING SUPERVISED (COMPETITIVE) ATHLETIC GAMES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
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 services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ 216641 including grants of \$) (Revenue \$ 223399)

PROVIDED SUPERVISED (COMPETITIVE) ATHLETIC GAMES FOR OVER 600 NEIGHBORHOOD CHILDREN FROM APRIL THROUGH SEPTEMBER AT OUR FACILITY.

4b (Code:) (Expenses \$ 35018 including grants of \$) (Revenue \$ 35018)

CAPITAL IMPROVEMENTS WERE MADE TO OUR FACILITY BY ADDING A NEW PLAYGROUND FOR YOUNGER CHILDREN AND REPLACING OUT-DATED PICNIC TABLES BY VIRTUE OF A LOCAL GOVERNMENT GRANT THAT WE RECEIVED.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses > 251659

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	✓	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓	
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		✓
4 Section 501(c)(3) organizations. 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	4		✓
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		✓
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		✓
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		✓
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		✓
b 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	11b		✓
c 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	11c		✓
d 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	11d		✓
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
f 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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		✓
12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		✓
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		✓
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		✓
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 (see instructions)	17		✓
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	✓	
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	✓	
20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part V Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		✓
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		✓
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 employees? <i>If "Yes," complete Schedule J</i>		✓
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		✓
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		✓
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? <i>If "Yes," complete Schedule L, Part I</i>		✓
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II		✓
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		✓
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		✓
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		✓
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		✓
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		✓
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		✓
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		✓
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		✓
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? <i>If "Yes," complete Schedule R, Part I</i>		✓
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		✓
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		✓
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		✓
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		✓
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? <i>If "Yes," complete Schedule R, Part VI</i>		✓
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	✓	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with columns for line numbers (1a-14b), descriptions of questions, and Yes/No checkboxes. Includes questions about Form 1096, Form W-2G, backup withholding, Form W-3, foreign accounts, prohibited tax shelter transactions, and Form 8282.

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. Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a	18		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	0		
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			<input checked="" type="checkbox"/>
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			<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?	6	<input checked="" type="checkbox"/>		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	<input checked="" type="checkbox"/>		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	<input checked="" type="checkbox"/>		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a	<input checked="" type="checkbox"/>		
b	Each committee with authority to act on behalf of the governing body?	8b	<input checked="" type="checkbox"/>		
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			<input checked="" type="checkbox"/>

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No	
10a	Did the organization have local chapters, branches, or affiliates?	10a		<input checked="" type="checkbox"/>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		<input checked="" type="checkbox"/>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		<input checked="" type="checkbox"/>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<input checked="" type="checkbox"/>
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		<input checked="" type="checkbox"/>
13	Did the organization have a written whistleblower policy?	13		<input checked="" type="checkbox"/>
14	Did the organization have a written document retention and destruction policy?	14		<input checked="" type="checkbox"/>
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?			
a	The organization's CEO, Executive Director, or top management official	15a		<input checked="" type="checkbox"/>
b	Other officers or key employees of the organization	15b		<input checked="" type="checkbox"/>
	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		<input checked="" type="checkbox"/>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ▷ KENTUCKY
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▷ TIM CARPENTER, 1714 WINDSOR PLACE, LOUISVILLE, KY 40204 (812) 639-9933

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

Check if Schedule O contains a response or note to any line in this Part VII

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.

- 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, if any. 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) <u>ARTHUR A. McCARTY SR.</u> PRESIDENT	20			✓				0	0	0
(2) <u>TIMOTHY PIKE</u> VICE PRESIDENT-BASEBALL	10			✓				0	0	0
(3) <u>JENNIFER KEEN</u> VICE PRESIDENT-SOFTBALL	10			✓				0	0	0
(4) <u>PAUL MARTIN JR.</u> VICE PRESIDENT-TEE BALL	10			✓				0	0	0
(5) <u>TIMOTHY CARPENTER</u> TREASURER	20			✓				0	0	0
(6) <u>CARRIE SCHNEIDTMILLER</u> SECRETARY	10			✓				0	0	0
(7) <u>MARK LINDSEY</u> ASST. VICE PRESIDENT-BASEBALL	5			✓				0	0	0
(8) <u>WAYNE SARTIN</u> PLAYER AGENT 13 - 15 BASEBALL	2			✓				0	0	0
(9) <u>STEVE BROWN</u> PLAYER AGENT 11 - 12 BASEBALL	2			✓				0	0	0
(10) <u>KEVIN CARPENTER</u> PLAYER AGENT 9 - 10 BASEBALL	2			✓				0	0	0
(11) <u>GREGORY GUINN</u> PLAYER AGENT 7 - 8 MACHINE PITCH	2			✓				0	0	0
(12) <u>NATALIE BENNETT</u> PLAYER AGENT SOFTBALL	2			✓				0	0	0
(13) <u>WAYNE SWEENEY</u> PLAYER AGENT TEE BALL	2			✓				0	0	0
(14) <u>KEITH INGRAM</u> BOARD MEMBER AT - LARGE	1			✓				0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) KIM INGRAM BOARD MEMBER AT - LARGE	1			✓				0	0	0
(16) ANDY KEEN BOARD MEMBER AT - LARGE	1			✓				0	0	0
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total								0	0	0
c Total from continuation sheets to Part VII, Section A								0	0	0
d Total (add lines 1b and 1c)								0	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		✓
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		✓
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		✓

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE	NOT APPLICABLE	0

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 0					
	b Membership dues	1b 0					
	c Fundraising events	1c 0					
	d Related organizations	1d 0					
	e Government grants (contributions)	1e 35018					
	f All other contributions, gifts, grants, and similar amounts not included above	1f 1974					
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f		36992				
	Program Service Revenue	2a SIGN UP FEES	Business Code 713990	47158	0	0	0
b TOURNAMENT INCOME		713990	33193	0	0	0	
c TEAM SPONSONSHIPS		713990	14810	0	0	0	
d PICTURE REVENUE		713990	1047	0	0	0	
e _____							
f All other program service revenue .							
g Total. Add lines 2a-2f			96208				
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)		9	0	0	0
	4 Income from investment of tax-exempt bond proceeds		0	0	0	0	
	5 Royalties		0	0	0	0	
	6a Gross rents	(i) Real	0	0			
		(ii) Personal	0	0			
		b Less: rental expenses	0	0			
		c Rental income or (loss)	0	0			
	d Net rental income or (loss)		0	0	0	0	
	7a Gross amount from sales of assets other than inventory	(i) Securities	0	0			
		(ii) Other	0	0			
		b Less: cost or other basis and sales expenses	0	0			
		c Gain or (loss)	0	0			
	d Net gain or (loss)		0	0	0	0	
	8a Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18	a 19930					
		b Less: direct expenses	b 8537				
		c Net income or (loss) from fundraising events		11393	0	0	0
	9a Gross income from gaming activities. See Part IV, line 19	a 33321					
		b Less: direct expenses	b 12806				
c Net income or (loss) from gaming activities			20515	0	0	0	
10a Gross sales of inventory, less returns and allowances	a 79787						
	b Less: cost of goods sold	b 46239					
	c Net income or (loss) from sales of inventory		33548	0	0	0	
Miscellaneous Revenue		Business Code					
11a _____			0	0	0	0	
	b _____		0	0	0	0	
	c _____		0	0	0	0	
	d All other revenue		0	0	0	0	
e Total. Add lines 11a-11d		0					
12 Total revenue. See instructions.		198665	0	0	0		

Part X Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	0	0		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	0	0		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0	0		
4 Benefits paid to or for members	0	0		
5 Compensation of current officers, directors, trustees, and key employees	0	0	0	0
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7 Other salaries and wages	0	0	0	0
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	0	0	0
9 Other employee benefits	0	0	0	0
10 Payroll taxes	0	0	0	0
11 Fees for services (non-employees):				
a Management	0	0	0	0
b Legal	0	0	0	0
c Accounting	0	0	0	0
d Lobbying	0	0	0	0
e Professional fundraising services. See Part IV, line 17	0			0
f Investment management fees	0	0	0	0
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0	0	0	0
12 Advertising and promotion				
13 Office expenses	6593	5593	0	0
14 Information technology	0	0	0	0
15 Royalties	0	0	0	0
16 Occupancy	47815	47815		
17 Travel	0	0	0	0
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19 Conferences, conventions, and meetings	0	0	0	0
20 Interest	248	248	0	0
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	0	0	0	0
23 Insurance	14935	14935	0	0
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CAPITAL IMPROVEMENTS	35018	35018	0	0
b TOURNAMENT EXPENSES	30931	30931	0	0
c UMPIRES & SCOREKEEPERS	20742	20742	0	0
d UNIFORMS	17110	17110	0	0
e All other expenses	18516	18516	0	0
25 Total functional expenses. Add lines 1 through 24e	191908	191908	0	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing	11363	1	11595
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	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)	11363	16	11595	
Liabilities	17	Accounts payable and accrued expenses	7006	17	481
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	7006	26	481
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	4357	33	11114	
34	Total liabilities and net assets/fund balances	4357	34	11114	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	198665
2	Total expenses (must equal Part IX, column (A), line 25)	2	191908
3	Revenue less expenses. Subtract line 2 from line 1	3	6757
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4357
5	Net unrealized gains (losses) on investments	5	0
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	11114

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
 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? . . .
 If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c 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?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 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?
- 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.

	Yes	No
2a		✓
2b		✓
2c		
3a		✓
3b		

Germantown Baseball Inc.

BALANCE SHEET

As of September 30, 2014

	TOTAL
ASSETS	
Current Assets	
Bank Accounts	
Hilliard Lyons (deleted)	0.00
PNC-Gaming (deleted)	0.00
PNC-Operating (deleted)	0.00
Republic Bank - Gaming	534.02
Republic Bank - Operating	10,987.31
Republic Savings Account	73.95
Total Bank Accounts	\$11,595.28
Accounts Receivable	
Republic Bank - Money Market	0.00
Total Accounts Receivable	\$0.00
Total Current Assets	\$11,595.28
Other Assets	
Investment (deleted)	0.00
_Invest Adjust (deleted)	0.00
Total Other Assets	\$0.00
TOTAL ASSETS	\$11,595.28
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	480.50
Total Accounts Payable	\$480.50
Total Current Liabilities	\$480.50
Total Liabilities	\$480.50
Equity	
Opening Balance Equity {3}	90,193.84
Retained Earnings	-85,836.61
Net Income	6,757.55
Total Equity	\$11,114.78
TOTAL LIABILITIES AND EQUITY	\$11,595.28

Germantown Baseball Inc.

PROFIT AND LOSS

October 2013 - September 2014

	TOTAL
Income	
Concession Income	67,307.63
Concession Income-Deposit Fees	5,210.00
Contributions, Gifts, Grants	
Government Grants	35,017.96
Other Contributions, Gifts, Etc.	1,973.80
Total Contributions, Gifts, Grants	36,991.76
Fundraising Revenue	
Alumni Game Income	3,398.00
Casino Night Income	458.00
Golf Scramble Income	6,883.00
Picnic Income	17,583.52
Picnic Raffle Income	16,300.00
Total Fundraising Revenue	45,420.52
Interest Income	9.69
Parents Shirt Income	7,269.00
Picture Income	1,047.00
Sign-Up Income (Fall)	3,012.00
Sign-Up Income (Spring)	39,146.00
Sponsor Income	14,310.00
Tournament Gate Income	13,474.75
Tournament Shirt Income	3,181.00
Tournament Sponsor Income	6,309.43
Tournament Uniform Fees	3,528.00
Total Income	\$253,416.79
Expenses	
Administrative Expense	2,586.94
Bank Charge Expense	81.00
Capital Improvements Expense	35,017.96
Concession Expense	35,710.80
Concession Management	6,500.00
Dues and Subscriptions	960.00
Dumpster Expense	2,345.11
Equipment(Playing) Expense	10,918.05
Field Maintenance Expense	39.99
Field Supplies Expense	7,560.35
Gasoline & Diesel Fuel Expense	1,251.53
Mower & Tractor Repairs	2,072.54
Total Field Maintenance Expense	11,724.41
Fundraising Expenses	
Alumni Game Expense	1,614.09
Golf Scramble Expense	3,486.93
Picnic Expense	1,211.38

	TOTAL
Picnic Raffle Prizes	1,300.00
Total Fundraising Expenses	13,512.40
Groundskeeper Expense	22,680.00
Insurance Expense	14,935.00
Interest Expense	247.78
Licenses and Permits	375.00
Parent Shirt Expense	4,028.50
Postage Expense	226.86
Printing Expense	1,049.87
Program Expense	1,757.24
Property Maintenance Expense	3,911.54
Refund Expense	1,039.00
Return Check Expense	227.00
Sales Tax Expense	3,852.47
Scorekeeper Expense	4,020.50
Security Expense	1,035.06
Start-up Expense	0.00
Telephone Expense	1,545.07
Tournament Entry Fee Expense	4,300.00
Tournament Shirt Expense	3,940.90
Tournament Ump & Scorer Expense	3,534.00
Tournament Uniform Expense	3,554.90
Travel Expense (Allstars)	5,975.99
Trophy Expense (Reg. Season)	1,287.75
Trophy Expense (Tournaments)	1,325.00
Umpire Expense	13,721.50
Uniform Expense	17,110.25
Utility Expense	4,291.38
Total Expenses	\$251,859.23
Net Operating Income	33,757.55
Net Income	33,757.55

Worksheet for Germantown Baseball Inc. FYE 2013 Form 990EZ Tax Return

FORM 990	QUICKEN CATEGORY DESCRIPTION	INCOME	EXPENSE		
Part IX					
13	Postage Expense		226.86		
13	Printing Expense		1,049.87		
13	Administrative Expense		2,604.50		
13	Advertising Expense		-		
13	Bank Charges		81.00		
13	Dues Expense		990.00		
13	Licenses & Permits		375.00		
13	Refund Expense		1,039.00		
13	Return Check Charges		227.00	6,593.23	
16	Dumpster Expense		2,645.11		
16	Field Maintenance Expense		11,724.41		
16	Groundskeeper Expense		22,680.00		
16	Property Maintenance Expense		3,911.54		
16	Repairs		-		
16	Security Expense		1,035.06		
16	Telephone Expense		1,527.51		
16	Utility Expense		4,291.38	47,815.01	
20	Interest Expense		247.78	247.78	
23	Insurance Expense		14,935.00	14,935.00	
24	a Capital Improvements		35,017.96	35,017.96	
24	b Tournament Entry Fee Expense		4,300.00		
24	b Tournament Shirt Expense		3,940.90		
24	b Tournament Umpire & Scorer Expense		6,534.00		
24	b Tournament Uniform Expense		8,554.90		
24	b Travel Expense (Allstars)		5,975.99		
24	b Trophy Expense (Tournaments)		1,625.00	30,930.79	
24	c Scorekeeper Expense		4,020.50		
24	c Umpire Expense		16,721.50	20,742.00	
24	d Uniform Expense		17,110.25	17,110.25	
24	e Equipment (Playing) Expense		10,918.05		
24	e Sales Tax Expense		3,852.47		
24	e Trophy Expense (Reg. Season)		1,987.75		
24	e Program Expense		1,757.24	18,515.51	
		258,416.78	258,416.78	251,659.23	251,659.23

6,757.55

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2013

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

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public
Inspection

Name of the organization

Employer identification number

GERMANTOWN BASEBALL INC.

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

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

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Non-functionally integrated
 - 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 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?

	Yes	No
11g(i)		
 - (ii) A family member of a person described in (i) above?

	Yes	No
11g(ii)		
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(iii)		
 - h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▷	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▷	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▷ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14		%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15		%
16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▷ <input type="checkbox"/>			
b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▷ <input type="checkbox"/>			
17a 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▷ <input type="checkbox"/>			
b 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▷ <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▷ <input type="checkbox"/>			

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	43290	66105	71380	42461	84150	307386
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	129542	151184	157881	116077	182068	736752
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
6 Total. Add lines 1 through 5	172832	217289	229261	158538	266218	1044138
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	0	0	0	0	0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6.)						1044138

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	172832	217289	229261	158538	266218	1044138
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4	23	6	11	9	53
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
c Add lines 10a and 10b	4	23	6	11	9	53
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0
13 Total support. (Add lines 9, 10c, 11, and 12.)	172836	217312	229267	158549	266227	1044191
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	98.95 %
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	99.98 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	.00 %
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	.01 %

- 19a **33 1/3% support tests—2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- b **33 1/3% support tests—2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶



Supplemental information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

A series of horizontal dashed lines providing space for supplemental information.

Schedule of Contributors

2013

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

Name of the organization

GERMANTOWN BASEBALL INC.

Employer identification number

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

GERMANTOWN BASEBALL INC.



Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LOUISVILLE/JEFFERSON COUNTY METRO GOVERNMENT 611 W. JEFFERSON ST. LOUISVILLE, KY 40202-2743	\$ 35018	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

GERMANTOWN BASEBALL INC.



Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----

Name of organization

Employer identification number

GERMANTOWN BASEBALL INC.

Part III

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▷ \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

Part II

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>GOLF SCRAMBLE</u> (event type)	<u>ANNUAL PICNIC</u> (event type)	<u>CASINO NIGHT</u> (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	6683	12791	456	19930
	2 Less: Contributions	0	0	0	0
	3 Gross income (line 1 minus line 2)	6683	12791	456	19930
Direct Expenses	4 Cash prizes	0	0	0	0
	5 Noncash prizes	0	0	0	0
	6 Rent/facility costs	0	0	0	0
	7 Food and beverages	0	3924	0	3924
	8 Entertainment	0	0	0	0
	9 Other direct expenses	3487	1126	0	4613
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▷				
11 Net income summary. Subtract line 10 from line 3, column (d) ▷					11393

Part III

Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue	0	10056	23265
Direct Expenses	2 Cash prizes	0	7667	1500	9167
	3 Noncash prizes	0	0	1212	1212
	4 Rent/facility costs	0	0	0	0
	5 Other direct expenses	0	0	2427	2427
	6 Volunteer labor	<input checked="" type="checkbox"/> Yes 100 % <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes 100 % <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes 100 % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d) ▷					12806
8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▷					20515

9 Enter the state(s) in which the organization operates gaming activities: KENTUCKY

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity operated in:

a The organization's facility	13a	100 %
b An outside facility	13b	0 %
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▷ RON HILDENBRAND

Address ▷ 1249 BOURBON AVE., LOUISVILLE, KY 40213

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▷ \$ _____ and the amount of gaming revenue retained by the third party ▷ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▷ _____

Address ▷ _____

16 Gaming manager information:

Name ▷ TIM CARPENTER

Gaming manager compensation ▷ \$ 0

Description of services provided ▷ TREASURER OF THE ORGANIZATION

Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▷ \$ 0

Part IV

Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

THE ORGANIZATION CONDUCTED A GOLF SCRAMBLE FUNDRAISER IN APRIL. AN ANNUAL PICNIC WAS HELD AT OUR FACILITY IN MAY. BOTH GAMING AND NON-GAMING ACTIVITIES WERE HELD. ALL FUND RAISING FUNCTIONS ARE HELD TO OFFSET LEAGUE EXPENSES AND LESSEN THE FEES THAT ARE CHARGED TO OUR MEMBERSHIP. ALL REQUIRED STATE & LOCAL LICENSES WERE PROCURED FOR THESE EVENTS.

**SCHEDULE O
(Form 990 or 990-EZ)**

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.

OMB No. 1545-0047

2013

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

▶ 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.

Name of the organization

GERMANTOWN BASEBALL INC.

Employer identification number



PART VI LINE 6: ARTICLE VII OF THE ORGANIZATION RULES AND BY-LAWS STATES THAT (a) PARENTS, GRANDPARENTS, AND GUARDIANS OF BOYS AND GIRLS ACTIVELY PARTICIPATING IN GERMANTOWN PROGRAMS SHALL BE MEMBERS. (b) MANAGERS, COACHES, UMPIRES, GROUNDSKEEPERS AND SCOREKEEPERS (16 YEARS AND OLDER) WHO DO NOT QUALIFY UNDER PARAGRAPH (a) SHALL BE MEMBERS. (c) MEMBERS OF THE BOARD OF DIRECTORS AND COMMITTEE CHAIRPERSONS WHO DO NOT QUALIFY UNDER PARAGRAPH (a) SHALL BE MEMBERS. (d) EACH SPONSOR OR BOOSTER IS ALLOWED ONE MEMBERSHIP.

PART VI LINE 7a: ARTICLE III OF THE ORGANIZATION RULES AND BY-LAWS STATES THE BOARD OF DIRECTORS SHALL BE COMPOSED OF 16 MEMBERS AS FOLLOWS: PRESIDENT, 1ST VICE PRESIDENT (SUPERVISES BASEBALL), 2ND VICE PRESIDENT (SUPERVISES SOFTBALL, 3RD VICE PRESIDENT (SUPERVISES T-BALL AND MACHINE PITCH), ASSISTANT VICE PRESIDENT BASEBALL, TREASURER, SECRETARY, THREE BASEBALL PLAYER AGENTS, ONE SOFTBALL PLAYER AGENT, ONE MACHINE PITCH PLAYER AGENT, ONE T-BALL PLAYER AGENT AND THREE MEMBERS AT-LARGE, ALL TO BE ELECTED BY THE GENERAL MEMBERSHIP.

PART VI LINE 7b: ARTICLE V OF THE ORGANIZATION RULES AND BY-LAWS STATES THE GOVERNMENT OF GERMANTOWN BASEBALL INC. SHALL BE UNDER THE DIRECT SUPERVISION OF THE PRESIDENT AND THE BOARD OF DIRECTORS. NO MATTER HOW MANY MEMBERS OF THE BOARD OF DIRECTORS ARE IN ATTENDANCE AT A MEETING, A CHANGE OF THE BY-LAWS WILL REQUIRE AT LEAST 9 VOTES TO CARRY. FURTHERMORE, ARTICLE VI OF THE ORGANIZATION RULES AND BY-LAWS STATE MEETINGS OF THE GENERAL MEMBERSHIP SHALL BE HELD ON THE FIRST THURSDAY OF EACH MONTH AND THAT ROBERT'S RULES OF ORDER WILL BE IN EFFECT ONLY WHEN THE RULES AND BY-LAWS OF THE ORGANIZATION DO NOT COVER THE SITUATION.

PART VI LINE 11b: UPON COMPLETION OF FORM 990, A COPY OF THE FILING IS SUBMITTED TO THE LEAGUE PRESIDENT FOR REVIEW AND RETENTION PURPOSES.

PART VI LINE 18: FORM 990 IS AVAILABLE FOR PUBLIC INSPECTION UPON WRITTEN REQUEST TO THE ORGANIZATION.

PART VI LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE UPON WRITTEN REQUEST TO THE ORGANIZATION. THE FINANCIAL STATEMENTS OF THE ORGANIZATION ARE AVAILABLE AT EACH MONTHLY MEETING OF THE GENERAL MEMBERSHIP.

BR 82 - Pg 462

ARTICLE IV: CORPORATION TO COMMENCE

The said corporation shall commence to do business when these Articles are duly filed and recorded, and the location of said corporation shall be purposive, unless sooner dissolved by a vote of the holders of the membership.

ARTICLE V: CAPITAL STOCK

There shall be no capital stock of the corporation hereby organized and no private pecuniary profit shall be derived from said corporation, its business or the operation thereof, and no member or officer of the corporation shall receive any salary or compensation for service or any enrichment or pecuniary profit whatsoever from said corporation and said member or officer of the corporation shall be entitled to have paid to them their actual expenses incurred in connection with the business of the corporation.

ARTICLE VI: POWERS

The said corporation shall have the power to adopt such resolutions, by-laws, rules and regulations of its officers as shall be necessary and advisable for the transaction of its business or to expedite the management of its affairs.

ARTICLE VII: OFFICERS

The Officers of said corporation shall be:

President
First Vice-President
Second Vice-President
Third Vice-President
Fourth Vice-President
Treasurer
Recording Secretary
Corresponding Secretary
Financial Secretary

and they shall hold office for any year or until their successors are elected. These officers shall constitute a Board of Directors to whom the general management of all interests of the corporation shall be vested.

The incorporators herein named shall hold their first meeting on *October* 1, 1957 at the main office of the corporation, 1234 Main Street, Boston, at which time and place, the officers of the Board of Directors, to whom the office shall be committed, shall be elected. The incorporators shall serve on the Board of Directors until the meeting to elect said Directors is held.

The election of officers shall be held the second Monday of November of each year.

Blk #3 - Pg 463

ARTICLE VIII. AMOUNT OF INDEBTEDNESS

The maximum corporate indebtedness which this corporation may at any time incur shall not exceed Five Thousand Dollars.

ARTICLE IX. THE NAME AND PLACE OF RESIDENCE OF MEMBERS OF THIS CORPORATION

NAME	RESIDENCE
Urban Bestman	1007 River
R. J. BISHOPS	505 Lytle
James B. Henry	693 Glavin Lane
Clarence Berger, Jr.	1021 Fisher

ARTICLE X. MEMBERSHIP

There shall be admitted to membership in this corporation any citizens of Jefferson County, Kentucky, who desire to become a member of said corporation and who filed application therefor and who, are accepted to membership by the persons who are already members of the corporation at the time of such application.

ARTICLE XI. PRIVATE PROPERTY OF MEMBERS OR PARTNERS SHALL NOT BE SUBJECT TO PAYMENT OF CORPORATE DEBTS

The private property of the partners or members shall not be subject to payment of corporate debts.

IN WITNESS WHEREOF we have hereunto affixed our signatures as incorporators to these Articles of Incorporation this _____ day of _____, 1951.

Urban Bestman
Urban Bestman

R. J. Bishops
R. J. Bishops

James B. Henry
JAMES B. HENRY

Clarence Berger, Jr.
CLARENCE BERGER, JR.

STATE OF KENTUCKY
COUNTY OF JEFFERSON

I, James B. Henry, a Notary Public for the State and County aforesaid, do hereby certify that the foregoing Articles of Incorporation of _____

File 83-07 464

born Little League, Incorporated, was filed by ...
and delivered by said parties to be their true and legal...

Witness my hand this day and year above mentioned,
Notary Public, Jefferson County, Ky.
My commission expires Oct. 15, 1953

[Signature]
Notary Public, Jefferson County, Kentucky



Subscribed and sworn to before me by James J. ...

October

at the County of ... November 12, 1953

[Signature]
Notary Public, Jefferson County, Kentucky

[Handwritten note]
James J. ...

1953 OCT 2 PM 12 32
3 00
JAMES J. ...
BY ...

ORIGINAL COPY
FILED AND RECORDED
OCT - 1 1953
Charles F. ...
SECRETARY OF STATE & TREASURER
BY ...
CLERK OF COURTS

Article VII of the Articles of Incorporation of the Chesapeake Little League shall be amended by deleting the present Article in its entirety and substituting the following:

(a) The officers of the corporation shall be a President, Vice-President, Treasurer and Secretary.

(b) The government of the Chesapeake Little League shall be under the direct supervision of the President and the Board of Directors.

(c) The Board of Directors shall consist of fifteen members as follows:

The President, Vice-President, Secretary and Treasurer of the corporation; the Player Agent, two Major League Managers, two Minor League Managers, a member of the Women's Auxiliary, and five persons to be selected from the membership at large.

(d) All of the above-named except the Player Agent, who is appointed by the President, shall be elected at the annual meeting of the corporation, each to serve for a period of two years or until his successor has been elected and qualified; provided, however, that the President, Secretary, member from the Women's Auxiliary and three of the five Board Members selected from the membership at large, shall be elected in the odd-numbered years; and the other officers and managers and two of the Board Members selected from the membership at large shall be elected in the even-numbered years; provided further, that the Vice-President, Treasurer, two Major League Managers, two Minor League Managers, and the two members from the membership at large elected in the year 1961, shall serve for one year, their terms to expire in 1962; and provided always, that the President shall not simultaneously hold the responsibility of any team.

(e) The annual meeting of the corporation shall be held on the second Tuesday of each September.

(f) All other articles, constitutional provisions, by-laws, or other rules in conflict herewith are hereby set aside and held for naught.

WITNESS the signatures of the President, Vice-President and Secretary as duly authorized at the annual meeting in September, 1961.

DATED this 22nd day of September, 1961.

Oliver M. Rapp
President

Lawrence H. Kelly
Vice-President

Thomas L. Brown, Jr.
Secretary

(1) United States
(2) Department of Justice
(3) Federal Bureau of Investigation
(4) Chicago, Illinois

The undersigned, being duly sworn, deposes and says that the contents of the foregoing are true and correct to the best of his knowledge and belief.

Subscribed and sworn to before me this _____ day of _____, 1961.

100-281

DELIVER TO
CHIEF OF POLICE
ATTORNEY GENERAL

60 S. W. 11th St.
MIAMI, FLORIDA

[Handwritten signature]

[Handwritten signature]

100-281

[Handwritten signature]
ORIGINAL COPY
FILED AND RECORDED
JAN 11 1961

of said corporation.
largely a corporation, and as to that part of the
corporate, to be the act and deed of the corporation.
was administered by *[Handwritten name]* as president,
and the undersigned, to hereby certify that the foregoing
is a true and correct copy of the original as the same
exists in the files of the undersigned.

100-281

AMENDED ARTICLES OF INCORPORATION
GERMANTOWN LITTLE LEAGUE, INCORPORATED

Know All Men by These Presents:

Whereas Germantown Little League, Incorporated is a corporation organized and existing under the laws of Kentucky with registered office located at Louisville, Jefferson County, Kentucky; and

Whereas, on the 4th day of February, 1964, the directors of such corporation, by majority vote, passed a resolution to amend the articles of incorporation, and more specifically Articles I and II thereof, to change the corporate name from Germantown Little League, Incorporated to Germantown Baseball, Incorporated; and the name of the Process Agent from James Henry to Sam J. Gruneisen, 1101 Samuel Avenue, Louisville, Kentucky; and,

Whereas, such proposed amendments were submitted to a vote of the members at a meeting held at the office of the Corporation on the 13th day of February 1964, upon due notice of the time, place and purpose of such meeting; and,

Whereas, such amendments received the affirmative vote of a majority of the voting power of the members entitled to vote;

NOW THEREFORE: the name of this corporation, as set forth in Article I of the Articles of Incorporation, is changed from Germantown Little League, Incorporated to Germantown Baseball, Incorporated, and the name of the Process Agent as set forth in Article II of the Articles of Incorporation, is changed from James Henry to Sam J. Gruneisen, 1101 Samuel Avenue, Louisville, Kentucky.

In Witness Whereof, the President and Secretary of the corporation have affixed their name this 10th day of March, 1964.

Sam J. Gruneisen
PRESIDENT

Carroll Thomas
SECRETARY

STATE OF KENTUCKY)
COUNTY OF JEFFERSON) SS

I, the undersigned Notary Public, in and for the State and County aforesaid, do hereby certify that the above-

STATE OF MISSISSIPPI
 COUNTY OF HENRY

I, the undersigned, Clerk of the State and County Records, do hereby certify that the foregoing instrument was duly recorded in my office in said State and County by Little H. Hubler, Inc. on the 10th day of March 1964.

Witness my hand and seal of office this 10th day of March 1964.

[Signature]
 Little H. Hubler, Inc.

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the State and County Records of the State of Mississippi, this 10th day of March 1964.

STATE OF MISSISSIPPI
 COUNTY OF HENRY

ARTICLE I

The name of the corporation shall be known as Little H. Hubler, Inc.

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the State and County Records of the State of Mississippi, this 10th day of March 1964.

APPROVED AND RECORDED
 BY THE CLERK OF THE STATE AND COUNTY RECORDS
 OF THE STATE OF MISSISSIPPI
 THIS 10TH DAY OF MARCH 1964

ORIGINAL COPY
 FILED AND RECORDED
 APR 1 1964
 COUNTY OF HENRY, MISSISSIPPI

[Signature]
 Notary Public, Jefferson County, Mississippi

NOTARY PUBLIC, JEFFERSON COUNTY, MISSISSIPPI

My Commission expires August 27, 1966.

WITNESSE MY HAND THIS 10th day of March, 1964.

BOOK 132 PAGE 151

PAID BY
 3-10
 094 APR 3 PM 2 03

749
10/10/64

ARTICLES OF INCORPORATION

194 424

AMENDED ARTICLES OF INCORPORATION
GREYHOUND BASKETBALL, INCORPORATED

Know All Men by These Presents:

Thomas Gerontinos Bassell, Incorporated is a corporation organized and existing under the laws of Kentucky with registered office located at Louisville, Jefferson County, Kentucky; and

Whereas, on the 12th day of August, 1964, the directors of such corporation, by majority vote, passed a resolution to amend the articles of incorporation, and more specifically to include Article XII, to show the method of disposal of any funds remaining upon the dissolution of this corporation; and

Whereas, such proposed amendment was submitted to a vote of the members at a meeting held at the office of the Corporation on the 11th day of August, 1964, upon due notice of the time, place and purpose of such meeting; and,

Whereas, such amendment received the affirmative vote of a majority of the voting power of the members entitled to vote;

BE IT THEREFORE: the articles of incorporation are amended by the addition of Article XII, which reads as follows:

ARTICLE XII

Upon the dissolution of this corporation as provided by these articles and after all necessary indebtedness including costs of dissolution have been provided for, any and all assets of this corporation are to be transferred in specie as soon as possible to the Kossak Christian Committee, Incorporated or to their affiliates located in Louisville, Jefferson County, Kentucky and upon said distribution being made, the affairs, purposes and functions of this corporation shall thereupon be terminated.

In Witness Whereof, the President and Secretary of the Corporation have caused their names to be signed this 11th day of August, 1964.

Thomas Gerontinos Bassell
PRESIDENT
James J. [unclear]
SECRETARY

I, the undersigned Notary Public, in and for the State and County
aforesaid, do hereby certify that the foregoing Articles were this
day produced to me in my County and were acknowledged by Sam J. Crutcher
President and James H. ... Secretary, to be
the act and deed of Warrenton Baseball, Incorporated; and to be their act
and deed as officers of said corporation.

My commission expires August 27, 1955.

WITNESS MY HAND THIS 1st day of September, 1954.

W. J. ...
NOTARY PUBLIC
Jefferson County, Kentucky

1954 Sept. 23
3 17

ORIGINAL COPY
FILED AND RECORDED

SEP 3 1954

W. J. ...
SECRETARY OF STATE OF KENTUCKY

BOOK 134 PAGE 425

ARTICLES OF INCORPORATION

WARRETON PLAYERS AND MANAGER CO., INC.

THESE ARTICLES OF INCORPORATION

State of Kentucky, Jefferson County, Kentucky, do
hereby file a corporation under the laws of the State of Kentucky

ARTICLE I

The name of the corporation shall be Warrenton Players and Manager Co., Inc.

ARTICLE II

The purpose shall be clubbing, holding, and promoting,
maintaining and related activities, including the purchase, sale,
and development of real estate, and to do any and all things
incidental to the operation of such a business.

ARTICLE III

The directors shall be Warrenton

ARTICLE IV

The capital stock of this corporation shall be ...

1976

AMENDED ARTICLES OF INCORPORATION
GERMANTOWN BASEBALL, INCORPORATED

Dwight R. Davis
SECRETARY OF STATE

KNOW ALL MEN BY THESE PRESENTS:

WHEREAS, GERMANTOWN BASEBALL, INCORPORATED, is a corporation organized and existing under the laws of Kentucky, with its registered office located at Louisville, Jefferson County, Kentucky, and

WHEREAS, on the 30th day of August, 1976, the Directors of such corporation, by majority vote, passed a resolution to amend the Articles of Incorporation, and more specifically Article VII, to read as follows:

(a) The officers of the corporation shall be a President, a First Vice-President, a Second Vice-President, Treasurer, and Secretary.

(b) Unchanged

(c) The Board of Directors shall consist of twenty-one (21) members as follows:

The President, First Vice-President, Second Vice-President, Treasurer, and Secretary. The remaining sixteen (16) members along with their duties, term of office and year of election shall be determined by the Germantown Baseball Incorporated By-Laws.

(d) The officers of the corporation shall be elected at the annual meeting of the corporation, each to serve for a period of two (2) years or until his successor has been elected and qualified; provided, however, that the President, Second Vice-President, and Treasurer shall be elected in odd-numbered years; and the First Vice-President and Secretary shall be elected in even-numbered years;

and provided, always, that the President shall not simultaneously hold the managership of any team.

(e) Unchanged

(f) Unchanged

WHEREAS, such proposed amendments were submitted to a vote of the members at a meeting held at the office of the corporation on the 30th day of August, 1976, upon due notice of time, place and purpose of such meeting, and

WHEREAS, such amendments received the affirmative vote of a majority of the voting power of the members entitled to vote.

NOW THEREFORE: Article VII of the Articles of Incorporation for GERMANTOWN BASEBALL, INCORPORATED, is amended forthwith.

IN WITNESS WHEREOF, the President and Secretary of the corporation have affixed their names this 20th day of September, 1976.

GERMANTOWN BASEBALL, INCORPORATED

Theodore F. Bergert
President

Beverly Ann Smith
Secretary

STATE OF KENTUCKY)
) SS
COUNTY OF JEFFERSON)

I, the undersigned Notary Public, in and for the state and county aforesaid, do hereby certify that the foregoing Amended Articles were this 20 day of Sept., 1976, produced to me in said state and county and were acknowledged by Theodore F. Bergert, President, and Beverly Ann Smith, Secretary, to be the act and deed of GERMANTOWN BASEBALL, INCORPORATED, a corporation, and to be their free act and deed as officers of said corporation.

My commission expires 4/13/78

Art. [Signature]
NOTARY PUBLIC, JEFFERSON CO., KENTUCKY

BOOK 239 PAGE 628

RECORDED IN CORPORATION BOOK
BOOK 239 PAGE 628
Jm

END OF DOCUMENT

BOOK 239 PAGE 628

TR: 8 p. 2: 16
Upper
5.00
Shawano

Request for Taxpayer Identification Number and Certification

**Give Form to the
requester. Do not
send to the IRS.**

Print or type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. GERMANTOWN BASEBALL INC.		
	2 Business name/disregarded entity name, if different from above		
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input checked="" type="checkbox"/> Other (see Instructions) ▶ 501(C)3 NON PROFIT ORGANIZATION		4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
	5 Address (number, street, and apt. or suite no.) P.O. BOX 32473		Requester's name and address (optional)
	6 City, state, and ZIP code LOUISVILLE, KY 40232-2473		
	7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number										
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> </table>										
or										
Employer identification number										

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶ <i>Arthur A. McCarty Sr.</i>	Date ▶ <i>1/29/15</i>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

The highest paid "staff" at Germantown Baseball INC., are independent contractors

1. Groundskeeper, Fred Gray
2. Concession Stand Manager, Paul Martin Sr.
3. Umpire, various different individuals paid depending on how many games they umpire.

KID STEERS in SAINT PARIS, OH

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Model: T180
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Hours Used: 2630
New/Used: U
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More

Seller Information

Jim s Equipment
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 Saint Paris, OH
 43072 [\(Map\)](#)



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SKU: 1WG5688

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Length: 8 Foot

Color Options: Green 2152

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Quantity: 13

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Price: \$4,041.36

Sale: \$808.09

Item Total: \$10,505.17

Subtotal: \$10,505.17

How is Tax Entered? Tax

Tax: \$0.00

Get Shipping Costs and Tax

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Grand Total: \$10,505.17

Promotion Code

Apply

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GERMANTOWN BASEBALL, INCORPORATED**General Information**

Organization Number	0019781
Name	GERMANTOWN BASEBALL, INCORPORATED
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	10/1/1953
Organization Date	10/1/1953
Last Annual Report	5/8/2015
Principal Office	ARTHUR A. MCCARTY SR. P.O. BOX 32473 LOUISVILLE, KY 40232-2473
Registered Agent	JAMES P. SOHAN 602 ONE RIVERFRONT PLAZA LOUISVILLE, KY 40202

Current Officers

President	Arthur A McCarty Sr.
Secretary	Carrie Schneitmiller
Treasurer	Timothy S Carpenter
Director	Timothy Pike
Director	Jennifer Keen
Director	Paul Martin Jr.

Individuals / Entities listed at time of formation

Director	URBAN BOEHMAN
Director	R J BISHOFF
Director	JAMES D HENRY
Director	CLARENCE BERGER JR
Incorporator	URBAN BOEHMAN
Incorporator	R J BISHOFF
Incorporator	JAMES D HENRY
Incorporator	CLARENCE BERGER JR

Images available online

Documents filed with the Office of the Secretary of State on September 15, 2004 or thereafter are available as scanned images or PDF documents. Documents filed prior to September 15, 2004 will become available as the images are created.

Annual Report	5/8/2015	1 page	PDF
Annual Report	3/26/2014	1 page	PDF

Principal Office Address Change	3/17/2014 7:52:38 PM	1 page	PDF
Principal Office Address Change	1/9/2013 9:16:35 AM	1 page	PDF
Annual Report	1/9/2013	1 page	PDF
Annual Report	6/27/2012	1 page	PDF
Annual Report	1/24/2011	1 page	PDF
Annual Report	9/6/2010	1 page	PDF
Annual Report	10/20/2009	1 page	tiff PDF
Annual Report	2/22/2008	1 page	tiff PDF
Annual Report	2/6/2007	1 page	PDF
Annual Report	2/16/2006	1 page	PDF
Annual Report	3/8/2005	1 page	tiff PDF
Annual Report	6/10/2003	2 pages	tiff PDF
Annual Report	5/7/2002	2 pages	tiff PDF
Annual Report	4/30/2001	2 pages	tiff PDF
Annual Report	5/16/2000	2 pages	tiff PDF
Annual Report	6/11/1999	2 pages	tiff PDF
Annual Report	5/11/1998	1 page	tiff PDF
Reinstatement	7/7/1997	2 pages	tiff PDF
Statement of Change	7/7/1997	1 page	tiff PDF
Administrative Dissolution	11/1/1996	1 page	tiff PDF
Annual Report	7/1/1996	1 page	tiff PDF
Annual Report	7/1/1995	1 page	tiff PDF
Annual Report	7/1/1994	1 page	tiff PDF
Annual Report	5/5/1993	1 page	tiff PDF
Annual Report	7/1/1992	1 page	tiff PDF
Annual Report	7/1/1991	1 page	tiff PDF
Annual Report	7/1/1990	1 page	tiff PDF
Annual Report	7/1/1989	1 page	tiff PDF
Annual Report	7/1/1988	1 page	tiff PDF
Annual Report	7/1/1986	1 page	tiff PDF
Annual Report	7/1/1986	1 page	tiff PDF
Amendment	3/1/1978	4 pages	tiff PDF
Statement of Change	6/14/1977	2 pages	tiff PDF
Amendment	9/28/1976	4 pages	tiff PDF
Statement of Change	2/25/1966	2 pages	tiff PDF
Amendment	9/9/1964	3 pages	tiff PDF
Amendment	4/1/1964	3 pages	tiff PDF
Statement of Change	4/1/1964	2 pages	tiff PDF
Statement of Change	2/7/1963	2 pages	tiff PDF
Amendment	10/17/1961	3 pages	tiff PDF
Articles of Incorporation	10/1/1953	5 pages	tiff PDF

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
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Annual report	5/8/2015 2:20:56 PM	5/8/2015 2:20:56 PM
Annual report	3/26/2014 4:54:28 PM	3/26/2014 4:54:28 PM
Principal office change	3/17/2014 7:52:38 PM	3/17/2014 7:52:38 PM
Annual report	1/9/2013 9:24:33 AM	1/9/2013 9:24:33 AM
Principal office change	1/9/2013 9:16:35 AM	1/9/2013 9:16:35 AM
Annual report	6/27/2012 12:04:39 PM	6/27/2012 12:04:39 PM
Annual report	1/24/2011 11:27:48 AM	1/24/2011 11:27:48 AM
Annual report	9/6/2010 10:41:38 AM	9/6/2010 10:41:38 AM
Annual report	10/20/2009 2:42:16 PM	10/20/2009
Annual report	2/22/2008 12:08:57 PM	2/22/2008
Annual report	2/6/2007 7:50:09 AM	2/6/2007 7:50:09 AM
Principal office change	2/6/2007 7:50:09 AM	2/6/2007 7:50:09 AM
Annual report	2/16/2006 4:51:15 PM	2/16/2006 4:51:15 PM
Principal office change	2/16/2006 4:51:15 PM	2/16/2006 4:51:15 PM
Principal office change	4/16/1998	4/16/1998
Reinstatement	7/7/1997	7/7/1997
Principal office change	7/7/1997	7/7/1997
Registered agent address change	7/7/1997	7/7/1997
Admin Dis. A. report not in	11/7/1996	11/7/1996
Amendment - Miscellaneous amendments	3/1/1978	3/1/1978
Amendment - Miscellaneous amendments	9/28/1976	9/28/1976
Amendment - Miscellaneous amendments	9/9/1964	9/9/1964
Amendment previous name	4/1/1964	4/1/1964

[GERMANTOWN
LITTLE LEAGUE,
INCORPORATED](#)

Microfilmed Images

Microfilm images are not available online. They can be ordered by faxing a [Request For Corporate Documents](#) to the Corporate Records Branch at 502-564-5687.

Annual Report	3/4/2005	1 page
Annual Report	4/1/2004	2 pages
Annual Report	6/10/2003	2 pages
Annual Report	5/7/2002	2 pages
Annual Report	4/30/2001	2 pages
Annual Report	5/16/2000	2 pages
Annual Report	6/11/1999	2 pages

Annual Report	5/11/1998	1 page
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Annual Report	5/5/1993	1 page
Annual Report	7/1/1992	1 page
Annual Report	7/1/1991	1 page
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Amendment	9/9/1964	3 pages
Statement of Change	4/1/1964	2 pages
Amendment	4/1/1964	3 pages
Statement of Change	2/7/1963	2 pages
Amendment	10/17/1961	3 pages

NDF NON-PROFIT APPLICATION CHECKLIST

Legal Name of Applicant Organization: Germantown Baseball, , Inc.		
Program Name: Equipment purchase	Request Amount: \$30,000.00	Yes/No/NA
Request form: Is the NDF request form signed by all Council Member(s) appropriating funding?		Yes
Request form: Is the funding proposed less than or equal to the request amount?		Yes
Request form: Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?		Yes
Application Page 1: Has prior Metro funds committed/granted been disclosed?		Yes
Application Page 1: Is the application properly signed and dated by authorized signatory?		Yes
Application Page 3: Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?		n/a
Application Pages 3 – 5: Is the proposed public purpose of the program well-documented?		Yes
Application 4: Is there adequate documentation of how the proceeds of the fundraiser will be spent?		n/a
Application Budget Page 6: Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for “Metro, Non Metro and Total” expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?		Yes
Faith Based Organizations: Is the signed Faith Based Form signed and included?		n/a
Jefferson County Only: Will all funding be spent in Louisville/Jefferson County?		no
Capital Project(s) request: Is the cost estimate(s) from proposed vendor(s) included?		Yes
Good Standing: Is the entity in good standing with: <ul style="list-style-type: none"> • Kentucky Secretary of State – include Secretary of State website information on organization • Louisville Metro Government – check OMB monthly report filed in Council Financial Reports • Internal Revenue Service – most recent Form 990 included 		Yes
Separate Taxing Districts: If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?		n/a
Small Cities: Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)		n/a
Operating Requests: Is recommended operating funding less than or equal to 33% of total operating budget?		n/a
IRS Exempt Proof: Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?		Yes
Operating Budget: Is the organization’s current fiscal year operating budget included?		Yes
Ordinance Required: Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.		Yes
Board Members: Is the entity’s board member list (with term length/term limits) included?		Yes
Staff: Is a list of the highest paid staff included with their expected annual personnel costs?		Yes
Annual Audit: Is the most recent annual audit (if required by organization) included?		n/a
Rent Requests: Is a copy of signed lease included?		n/a
Articles of Incorporation: Are the Articles of Incorporation of the organization included?		Yes
IRS Form W-9: Is the IRS Form W-9 included?		Yes
Evaluation Forms: Are the evaluation forms (if program participants are given evaluation forms) included?		n/a
Affirmative Action: Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?		n/a
Prepared by:		Date: