

California District 4

February 20, 2024

Volume 33 Issue 5





California 4 Little League

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California D4 Finances

September Balance

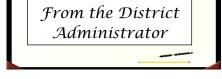
Beginning Balance	\$42,715.08
League Dues: Pittsburg	500.00
Donation – Challengers	1250.00
Dinner-Salad, Dessert, Supplies	77.36
Staff Travel Roundtables Reimbursements	2000.00
Staff Clothing	1751.61
Roundtable Lodging/Meals	4388.92
District Pins	2485.95
Lewis Cup Awards	
Martinez LL	1000.00
East County	500.00

Ending Balance \$32,011.24

250.00

Walnut Creek LL







2024 Lewis Cup Award

Concord American	1116
Pinole Hercules	1051
Alameda	1000
Walnut Creek	1000
Martinez	960
Clayton Valley	900
Richmond	900
North Oakland/South Oakland	836
Pittsburg	706
Lafayette	700
East County	620
Albany	617





From Liz Berg, ADA Safety

Below is the status of the leagues and their 2024 ASAP plan.

Congratulations to:

North/South Oakland, Pittsburg, Concord American, Clayton Valley, Walnut Creek, Richmond, and Alameda for having completed and approved ASAP for 2024.

Leagues that have completed the 2024 ASAP but need to submit registration information: **Martinez and Lafayette**

The following leagues have <u>not yet</u> <u>begun</u> their 2024 plan: **Albany, East County, and Pinole Hercules**



From ADA LL Baseball, Geoff Shiu

Thank You to the following Leagues for attending the 2024 CA4 LLB Interleague Organizational & Scheduling Meeting...

Clayton Valley Concord American Pinole Hercules Pittsburgh Richmond

Important for participating leagues to send me contact information for their teams in each division. Need names for managers, coaches with their email addresses and cell numbers.

Thank You to leagues that have already sent me contact information.

Special Thank You to the following CA4 ADAs... Carla Moore for hosting the meeting. Liz Berg for creating the Interleague Schedules. Jim Rose for covering the Interleague Rules!



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Reminders for the upcoming 50/70 and Juniors season:

- Teenage Baseball Rules Clinic is scheduled for Wednesday, 2/21/24 at 7:00pm.
 Location: Zoom Meeting Registration Link
- The <u>D4 Baseball Page</u> has links to schedules, contacts, and interleague rules.
- Games are played under the official Little League rules as indicated in the 2024 Little League Baseball Rules and Regulations and District 4 Interleague rules.

 No individual league's "Local" Rules will apply and no "Manager agreements" will be allowed to change or modify these rules.
- Games between Teams from different districts require approval from Little League (games between D4 leagues do not require approval). Please submit your inter-district requests through the Little League Data Center website.
- The Home Team is responsible for providing two umpires for each game, one of which needs to be at least 18 years of age. Strongly encourage volunteer umpires. If you need help staffing umpires for your teenage baseball games, please contact the D4 UIC Don Waddell at Ilcad4uic@gmail.com.

• Ensure your teenage baseball fields have break-away bases. We typically see this issue

when teenage baseball teams are playing at high schools.

Have fun!



From Jim Rose – Training Coordinator and Asst. UIC Softball

Every year, District 4 holds a series of rules clinics for our umpires, managers, coaches, and staff. These clinics are highly recommended and will prepare one for the coming 2024 Little League season. The clinics are PowerPoint presentations with video examples to highlight rules.

The first two Zoom Basic Rules Clinics have already been held, with a combined attendance of over eighty. They were recorded and are available for viewing on the District 4 YouTube channel: @CAD4

Basic Rules Clinic #1:

Covered New 2024 Rules, Regulations and Rules 1 and 2—Safety, Mandatory Play, Decorum, Equipment, and Definitions.

Basic Rules Clinic #2:

Covered Rules 2-7: Definitions, Beginning and Ending the Game, Batters and Runners.

The next two clinics are as follows:

Basic Rules Clinic #3:

Thursday, February 22, 7-8:15pm via Zoom.

Covers Base Awards, and Obstruction and Interference.

Basic Rules Clinic #4:

Thursday, February 29, 7-8:15pm via Zoom.

Covers Rules 8 and 9—The Pitcher and Umpire, and Review of District 4 Minor

and Major Divisions Baseball Interleague Rules

We also run a clinic for Teenage Baseball and one for softball.

Teenage Baseball Clinic:

<u>February 21, 7-8:30pm</u> via Zoom. Covers rules specific to Intermediate and Junior Divisions in baseball and District 4 Interleague rules.

Softball Rules Clinic:

February 26, 6:30-8:30, UC Extension Office, 2380 Bisso Lane, Concord.
Covers rules specific to softball, such as equipment, pitching, the circle, double first base, and District 4 Interleague rules.

The four, Basic Rules Clinics and the Teenage Baseball clinic require pre-registration.

Go to the home page for District 4 for the Basic Rules Clinics registration link ("Umpire Online Training"):

http://www.californiadistrict4littleleague.org/

To register for the Teenage Baseball Clinic, go to the District 4 webpage and click on the Teenage Baseball link.

The Softball Rules Clinic requires no registration; just show up.

In addition, if a League wants a separate Zoom or in-person clinic for their coaches and managers (for example, game management, interleague rules, common safety issues, etc.), please contact Jim Rose at irose001@aol.com or call (925) 348-0734.

And finally, all the District 4 Interleague rules are now posted on the web pages for Softball, Teenage Baseball, and Baseball.



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From ADA D4 UIC, Don Waddell

Role of the Game Coordinator

We are excited to see all of the young umpires who are getting trained in many of our leagues. However, leagues are reminded that Rule 9.03(d) requires that a responsible adult be assigned to any game where there is not an adult on field umpire.

This position is called 'Game Coordinator' and has the duty to support the youth umpires and to make decisions when needed to support safe play.

The Game Coordinator is to be assigned to only one game and must have no other duties. It is not the Board Member on Duty person, but could be a Board Member doing a different role.

The Game Coordinator by the rule shall:

- Participate in the on field pregame meeting with the umpires and managers just prior to the start of the game, to ensure that ground rules are covered, time limits, any special rules and that lineups are proper.
- Must remain at the game site at all times, including between innings in a position to see all the action on the field and in close proximity to the field (not in an enclosure). The Game Coordinator can be replaced during the game if they must leave for some reason.
- Oversee the conduct of all players, managers, coaches, and umpires during the game to ensure they meet the field decorum requirements as well as their responsibilities.
- Have the authority to disqualify any player, coach, manager, or substitute for objecting to decisions of the umpires, or for unsportsmanlike conduct or

language, or for other reasons called out in the rules. They have the authority to eject a disqualified person from the field.

 Have the sole authority to judge whether and when play shall be suspended due to weather conditions or unfit playing field, and to judge when it is safe to resume play. Leagues must remember that a game that has only youth umpires must not start before the Game Coordinator is in position.

If you want more information on the role of the Game Coordinator, we have a training video on our YouTube channel.

Thank You for Hosting our Umpire Clinic

Thank you to Pinole Hercules Little
League for hosting our upcoming West
Region Umpire Outreach Clinic on
February 25th. We expect to have 60
adult and youth umpires from District 4
and several surrounding Districts at
the clinic. Without the support of Arnold
Lum and his Board of Directors this clinic
would not be possible

District 4 Umpire Resources

With the season now underway for nearly all the leagues, our Umpire Training Clinics and Rules Instruction Clinics are nearing completion. But your umpires can continue to refresh their skills and knowledge by accessing the District 4 Umpire webpage. We have included links to video recordings of all of our 2024 Rules Clinics as well as to our recently updated Umpire Mechanics training videos. Also available for your use are several publications to help your umpires - the District 4 Umpire Basics handbook, Mechanics guides for both small diamond and large diamond umpires, and instructions on how to use a Line Up card. More resources are being added on a frequent basis and we

encourage your umpires to take a look at what is there for them! You can access the Umpire resources on the District 4 webpage via the menu link for D4 Umpires.

Umpire Resources

Don't forget to get direct access to all the training videos on our California District 4 Umpires You Tube Channel –

https://www.youtube.com/@C4UA







Out-of-Boundary Waiver

What is Needed

- Statement from player's family
 - o Reason for request
- Approval or denial from home league
 - o If denied, the league must give a reason
- · Approval or denial from requested league
 - If denied, the league must give a reason
- Recommendation from District Administrator
 - Pick one of the below options
 - Full eligibility
 - Red-Shirt (regular season only for 2024. Tournament eligible starting in 2025)
 - Denv
 - Any other important information regarding this request
- Player information
 - 1. Player's name
 - 2. Player's home address
 - 3. Player's age
 - 4. Where the player has been previously participating
 - If player has been participating in the requested league, was a residency waiver completed?

Once all information has been gathered by the DA, please send to the Region staff by Friday for presentation during the next scheduled Charter Committee meeting.

Committee Decision

- The player's request will be presented to the International Charter Committee
 - Typically meet on Wednesday
- The committee will respond with the following:
 - Full eligibility
 - Red-Shirt
 - Deny
 - Needs more information
 - Case will still be open. Region staff will reach out to the DA
- The committee's decision is final
- If a player is granted a waiver from the committee, they do not need to apply again in the future
 - This waiver will stay with the player for the duration of their career
- A formal response will be sent to the DA on Friday
 - Please make sure the League President and DA keep a copy



Out-of-Boundary Waiver Checklist

Parent

- ✓ Written statement that contains the reason for the request sent to Home League
- ✓ Written statement that contains the reason for the request sent to Requested League

Requested League

- ✓ Provide District Administrator with the written request from the player
- ✓ Provide District Administrator with your statement (approve or deny)
- ✓ Provide District Administrator with all four pieces of Player information

Home League

✓ Provide District Administrator with your statement (approve or deny with reason)

District Administrator

- ✓ Collect information from all parties involved (parent, home league, requested league)
- ✓ Send to region with your recommendation of the decision (full eligibility, red-shirt or deny with reason)
- ✓ Include any additional context if necessary

990-EZ

Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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.

Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2022 calendar year, or tax year beginning 10/01/2022 and ending 09/30/2023 B Check if applicable: C Name of organization D Employer identification number Address change LITTLE LEAGUE BASEBALL INC California District 4 45-4717356 Room/suite Name change Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Initial return 5147 Noakes Ct 925-367-3216 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Antioch, CA 94531 Number 3158 Application pending G Accounting Method: Cash Accrual Other (specify): **H** Check ☐ if the organization is **not** required to attach Schedule B I Website: http://www.californiadistrict4littleleague.org/ J Tax-exempt status (check only one) – 🗹 501(c)(3) 🗌 501(c) ((Form 990). ☐ 4947(a)(1) or ☐ 527) (insert no.) Trust Other: **K** Form of organization: | Corporation ✓ Association L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets 80.803 Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I . . . ~ 1 23,572 2 Program service revenue including government fees and contracts 2 9,506 3 3 46,340 4 Investment income 4 0 5a Gross amount from sale of assets other than inventory 5a 0 b Less: cost or other basis and sales expenses 0 Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a) С 5c 0 6 Gaming and fundraising events: Gross income from gaming (attach Schedule G if greater than Revenue 6a 1,385 Gross income from fundraising events (not including \$ o of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . 6b 0 **c** Less: direct expenses from gaming and fundraising events . . . 6с 0 Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d 1,385 7a Gross sales of inventory, less returns and allowances . . . 7a 0 7b b 0 Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a) . . С 7c 0 8 8 0 9 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 80,803 10 10 1,600 11 Benefits paid to or for members 11 61,205 12 Salaries, other compensation, and employee benefits 12 0 13 Professional fees and other payments to independent contractors 13 69 14 14 3,159 15 15 17 16 16 0 17 17 66,050 18 Excess or (deficit) for the year (subtract line 17 from line 9) 18 14,753 Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 19 30,441 20 20 0 Net assets or fund balances at end of year. Combine lines 18 through 20 21 45,194

Form 990-EZ (2022) Page **2**

Pa	Balance Sheets (see the instructions f	,				
	Check if the organization used Schedule	O to respond to ar	ny question in this	Part II		🔲
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			30,441	22	45,194
23	Land and buildings			0	23	0
24	Other assets (describe in Schedule O)			0	24	0
25	Total assets			30,441	25	45,194
26	Total liabilities (describe in Schedule O)			0	26	0
27	Net assets or fund balances (line 27 of column			30,441	27	45,194
Par	Statement of Program Service Accom	plishments (see th	e instructions for F	art III)		
	Check if the organization used Schedule	O to respond to ar	ny question in this	Part III 🗌		Expenses
What	t is the organization's primary exempt purpose?	See Schedule O, Sta	tement 1		١,	equired for section 1(c)(3) and 501(c)(4)
as m	ribe the organization's program service accomplisheasured by expenses. In a clear and concise m	anner, describe the			org	ganizations; optional for ners.)
•	ons benefited, and other relevant information for ea	<u> </u>				
28	District, Section and Regional Tournament Play orga	nization and awards				
	72					
	(Grants \$ 0) If this amount	includes foreign gra	nts, check here .	<u> L</u>	28	a 37,388
29	Training for District staff members					
	,	includes foreign gra			29	a 6,445
30	Challenger Jamboree An day long event for all members	oers participating in t	he Challenger progra	am. Little		
	League's adaptive baseball program for individuals v	with physical and inte	llectual challenges.			
		includes foreign gra			30	a 12,574
31	Other program services (describe in Schedule O)					
	(Grants \$ 0) If this amount	includes foreign gra	nts, check here .		31	a 0
32	Total program service expenses (add lines 28a t	hrough 31a)			32	2 56,407
Par	List of Officers, Directors, Trustees, and Key	Employees (list each	one even if not comp	pensated—see the in	nstrı	uctions for Part IV)
	Check if the organization used Schedule	O to respond to ar	ny question in this	Part IV		
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employ benefit plans, and deferred compensatio		e) Estimated amount of other compensation
Ted	Boet	2.50	0		0	0
	ict Administrator		·			•
	f Shiu	2.00	0		0	0
	stant District Administrator	2.00	·		1	ŭ
	a Moore	2.00	0		0	0
	etary	2.00	·		~	Ŭ
	Waddell	2.50	0		0	0
UIC	waddi	2.50	·		~	Ŭ
	Raines	2.00	0		0	0
	stant District Administrator (Softball)	2.00	U		١	Ü
	hen Mohammed	2.00	0		0	0
	stant District Administrator (Challenger Baseball)	2.00	U		١	Ü
	Rose	2.50	0		0	0
		2.50	U		١	U
	stant District Administrator (Training)	2.00	•		_	
Liz E	-	2.00	0		0	0
	ty Officer	a = =	=		+	
	son Lawrence	2.00	0		0	0
	stant District Administrator (Teen Age Baseball)				_	
	Rosky	1.50	0		0	0
	stant District Administrator (Senior Baseball Tournam				\perp	
	lido Anicete	1.50	0		0	0
Assi	stant UIC			İ	- [

Part V

	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	Part	۷.	
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		V
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		~
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		~
	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,	35b		
С	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		~
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions 0			
b	Did the organization file Form 1120-POL for this year?	37b		~
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		~
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9	-		
b	Gross receipts, included on line 9, for public use of club facilities	-		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911: 0; section 4912: 0; section 4955: 0 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
b	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year			
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		~
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed	700		
Ū	on organization managers or disqualified persons during the year under sections 4912,			
А	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line			
u	40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed: CA	100		
		925-36	7-3216	6
	Located at: 5147 Noiskos Ct Antioch CA 94521	0.41	531	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		~
	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country:	42c		•
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here			
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		~
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		V
С	Did the organization receive any payments for indoor tanning services during the year?	44c		1
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
	explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		1
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-F7. See instructions	1Eh		.,,

Other Information (Note the Schedule A and personal benefit contract statement requirements in the

orm 99	10-EZ (21	J22)								P	age 🖣
										Yes	No
46		ne organization engage, directly or in									
Dow!		ndidates for public office? If "Yes," c		Part I		· · ·			46		✓
Part '		Section 501(c)(3) Organizations All section 501(c)(3) organizations		ctions 17 10b or	nd 52 and	l comr	oloto th	o tabl	loc fo	or line	00
		50 and 51.	s must answer que	Stions 41–490 ai	iu 52, and	1 COLLIF	nete tri	e tabi	ies ic	אווו וכ	35
		Check if the organization used Sch	adula O ta raspand	to any question i	n thic Dar	. \/I					
		Check if the organization used Sci	ledule O to respond	to any question i	II IIIIS Fai	VI .	• •	• •		Yes	No
47	Did tl	he organization engage in lobbying	activities or have a	section 501(h) elec	tion in eff	ect dur	ing the	tay [162	NO
71		If "Yes," complete Schedule C, Part					_	·	47		/
48	•	organization a school as described in						·	48		~
49a		ne organization make any transfers to		•				.	49a		~
b		es," was the related organization a se		_					49b		
50		olete this table for the organization's								es. and	d kev
		oyees) who each received more than									,
			(b) Average	(c) Reportable	(d) ⊢	ealth ber	nefits,				
	(a)	Name and title of each employee	hours per week	compensation (Forms W-2/1099-MIS			mployee deferred			d amou pensati	
			devoted to position	1099-NEC)		mpensati		Othe	er COIII	pensan	IOII
None											
f		number of other employees paid over				_					
51	Comp	olete this table for the organization's	s five highest compe	ensated independe	ent contrac	tors w	ho each	rece	ived	more	than
	\$100,	,000 of compensation from the organ	lization. If there is no	ne, enter "None."							
	(a)	Name and business address of each independ	ent contractor	(b) Type of :	service		(c)	Compe	ensatio	on	
Nama						_					
None											
						-					
						_					
						+					
						+					
d	Total	number of other independent contra	ctors each receiving	over \$100,000 .							
52	Did t	the organization complete Schedu	le A? Note: All se	ction 501(c)(3) or	ganization	s mus	t attach	n a			
		il a karalı Ölalara dı il alı A		. , . ,	•				Yes		lo
		of perjury, I declare that I have examined this r						nowledg	ge and	belief,	it is
true, cor	rect, an	d complete. Declaration of preparer (other than	officer) is based on all info	rmation of which prepa	rer has any kr	owledge	-				
Sign		Signature of officer				Date					
Here		Ted Boet, District Administratror									
		Type or print name and title									
Paid		Print/Type preparer's name	Preparer's signature		Date	(Check 🗌	if P	MIT		
Prep	arer					s	self-emplo	yed			
Use (Firm's name				Firm's E	EIN				
		Firm's address				Phone r	10.				
viay th	ne IRS	discuss this return with the preparer	snown above? See i	nstructions				.	Yes		40

SCHEDULE A (Form 990)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Employer identification number

LITT	LE LEA	AGUE BASEBALL INC Californ	nia District 4				45-47	17356
Pai		Reason for Public Cha	<u> </u>					ons.
The o	•	zation is not a private founda		,	•	•	,	
1		church, convention of churc					0(b)(1)(A)(i).	
2		school described in section						
3		hospital or a cooperative hos		•			, , , , ,	(:::\
4		medical research organizationspital's name, city, and state	•	onjunction with a nosp	oitai desc	ribea in s	section 170(b)(1)(A)	(III). Enter the
5								
3		ection 170(b)(1)(A)(iv). (Com		college of drilversity	Owned 0	Operate	d by a government	ar unit described in
6	$\square A$	federal, state, or local gover	nment or govern	mental unit described	in sectio	on 170(b)	(1)(A)(v).	
7		n organization that normally			port from	a gover	nmental unit or fron	n the general public
		escribed in section 170(b)(1)		· ·				
8	□ A	community trust described in	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
9		n agricultural research organi						
		university or a non-land-gra niversity:	nt college of agr	iculture (see instruction	ons). Ente	er the nan	ne, city, and state of	the college or
10			receives (1) more	than 331/20% of its su	pport fro	m contrib	outions membership	fees and gross
10	re	n organization that normally in ceipts from activities related	to its exempt ful	nctions, subject to ce	rtain exce	eptions; a	and (2) no more than	33 ¹ /3% of its
	su	pport from gross investment equired by the organization a	t income and unı	related business taxal	ole incom	ne (less se	ection 511 tax) from	businesses
11		rquired by the organization a n organization organized and		•		•	•	
12		n organization organized and	•	•	-			out the nurnoses of
		ne or more publicly supported	•		•			
		e box on lines 12a through 12						
а		Type I. A supporting organ	nization operated	, supervised, or contr	olled by i	ts suppo	rted organization(s),	typically by giving
		the supported organization						
		supporting organization. Ye	ou must comple	ete Part IV, Sections	A and B.			
b		Type II. A supporting organ						
		control or management of				persons	that control or man	age the supported
		organization(s). You must	-					
С	Ш	Type III functionally integ its supported organization(ally integrated with,
لہ			• • •	,				td
d	Ш	Type III non-functionally integrated that is not functionally integrated in the state of the sta						
		requirement (see instruction						a an attentiveness
е		Check this box if the organ	•	• '		•		II Type III
		functionally integrated, or						5 II, 1 ypo III
f	Ente	er the number of supported of	organizations .					
g	Pro۱	vide the following information	n about the supp	orted organization(s).				
	(i) Nan	ne of supported organization	(ii) EIN	(iii) Type of organization		rganization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1–10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
							,	
					Yes	No		
(A)								
(B)								
(0)								
(C)								
(D)								
(E)								

Schedule A (Form 990) 2022 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Part II

(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) 2018 **(b)** 2019 (c) 2020 (d) 2021 **(e)** 2022 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge **Total.** Add lines 1 through 3 . . . 4 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) **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (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 Net income from unrelated business 9 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 VI.) **Total support.** Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) % Public support percentage from 2021 Schedule A, Part II, line 14 15 331/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2022. 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 VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2021. 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 VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

Schedule A (Form 990) 2022 Page **3**

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

(Complete only if you checked the box on line 10 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.)

Secti	on A. Public Support			•			
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
•	received. (Do not include any "unusual grants.")	70,536	34,161	33,529	50,230	80,803	269,259
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	70,536	34,161	33,529	50,230	80,803	269,259
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b						269,259
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	70,536	34,161	33,529	50,230	80,803	269,259
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	70,536	34,161	33,529	50,230	80,803	269,259
14	First 5 years. If the Form 990 is for the organization, check this box and stop he					ar as a section	
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2022 (line		•	3, column (f))		15	100 %
16	Public support percentage from 2021 Sch					16	100 %
	on D. Computation of Investment In				(0)	1	
17	Investment income percentage for 2022 (-		17	0 %
18 19a	Investment income percentage from 202 33 ¹ / ₃ % support tests — 2022. If the organ 17 is not more than 33 ¹ / ₃ %, check this box	ization did not	check the box	on line 14, an	nd line 15 is m		
b	331/3% support tests—2021. If the organize line 18 is not more than 331/3%, check this	ation did not ch	neck a box on I	ine 14 or line 1	9a, and line 16	is more than 3	3 ¹ /3%, and
20	Private foundation. If the organization di	-	_				_

Schedule A (Form 990) 2022 Page 4

Supporting Organizations Part IV

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Se

Jeen	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	103	NO
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.			
4a				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
7	benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

determine whether the organization had excess business holdings.)

10b

Schedule A (Form 990) 2022 Page 5 Part IV **Supporting Organizations** (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete **line 2** below. The organization is the parent of each of its supported organizations. *Complete line 3 below.* С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. Yes No Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. 3a

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

3b

Schedule A (Form 990) 2022

	Tune III New Functionally Integrated 500(a)(2) Supporting Ora		-ations	rage C
Part				
1	Check here if the organization satisfied the Integral Part Test as a qualifying			
Sect	instructions. All other Type III non-functionally integrated supporting organion A—Adjusted Net Income	IIZal	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		(Optional)
_ <u>.</u>	Recoveries of prior-year distributions	2		
_ _ _	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
<u>.</u>	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C-Distributable Amount	•		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional (see instructions)	ally i	ntegrated Type III suppor	rting organization

Schedule A (Form 990) 2022 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2022 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E—Distribution Allocations (see instructions) **Underdistributions Distributable Excess Distributions** Pre-2022 Amount for 2022 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 a From 2017 From 2018 **c** From 2019 **d** From 2020 **e** From 2021 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2022 distributable amount Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2022 from Section D, line 7: Applied to underdistributions of prior years Applied to 2022 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result 5 greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2023. Add lines 3j and 4c. Breakdown of line 7: Excess from 2018 . . . Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . .

Schedule A (Form 990) 2022 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization	Employer identification number
LITTLE LEACUE DACEDALL INC Colifornia Diotriot 4	4E 47179E4
LITTLE LEAGUE BASEBALL INC California District 4	45-4717356
Form 990-EZ, Part I, Line 10 - Donations to Western Region, and Don Goodman Memorial	
10111 770-E2, Fait 1, Line 10 - Donations to western region, and Don Goodman Methorial	

Schedule O, Statement 1 LITTLE LEAGUE BASEBALL INC

Form: **Form 990-EZ (2022)** EIN: **45-4717356**

Page: 2 Part III

Primary Exempt Purpose

Primary Exempt Purpose

Provide opportunities for youth throughout Alameda and Contra Costa counties to participate in baseball and softball