


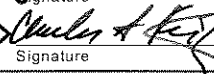
<b>Form CHAR500</b>  <small>This form used for Article 7-A, EPTL and dual filers (replaces forms CHAR 497, CHAR 010 and CHAR 006)</small>	<b>Annual Filing for Charitable Organizations</b> New York State Department of Law (Office of the Attorney General) Charities Bureau - Registration Section 120 Broadway New York, NY 10271 <a href="http://www.oag.state.ny.us/charities/charities.html">www.oag.state.ny.us/charities/charities.html</a>	<b>2006</b>  <b>Open to Public Inspection</b>
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**1. General Information**

a. For the fiscal year beginning (mm/dd/yyyy) <u>11/01</u> / <b>2006</b> and ending (mm/dd/yyyy) <u>10/31/2007</u>			
b. Check if applicable for NYS:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial filing <input type="checkbox"/> Final filing <input type="checkbox"/> Amended filing <input type="checkbox"/> NY registration pending	c. Name of organization <u>West Seneca Girls Softball Association, Inc.</u>		d. Fed. employer ID no. (EIN) (##-####-####) <u>16-1605340</u>
	e. NY State registration no. (##-##-##) <u>07-09-39</u>		
	Number and street (or P.O. box if mail not delivered to street address) <u>71 Pine Tree Lane</u>	Room/suite 	f. Telephone number <u>(716) 843-5090</u>
	City or town, state or country and zip + 4 <u>West Seneca, NY 14224-4146</u>		g. Email <u>charles.krotje@ey.com</u>

**2. Certification - Two Signatures Required**

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

a. President or Authorized Officer	 <small>Signature</small>	<u>John P. Hess</u> <small>Printed Name</small>	<u>President</u> <small>Title</small>	<u>2/2/2008</u> <small>Date</small>
b. Chief Financial Officer or Treasurer	 <small>Signature</small>	<u>Charles A. Krotje</u> <small>Printed Name</small>	<u>Treasurer</u> <small>Title</small>	<u>2/1/2008</u> <small>Date</small>

**3. Annual Report Exemption Information**

a. <b>Article 7-A</b> annual report exemption (Article 7-A registrants and dual registrants)  Check <input checked="" type="checkbox"/> if total contributions from NY State (including residents, foundations, corporations, government agencies, etc.) did not exceed \$25,000 <b>and</b> the organization did not use the services of a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during this fiscal year.  <b>NOTE:</b> An organization may also check the box to claim this exemption if no PFR or FRC was used <b>and</b> either: 1) the organization received an allocation from a federated fund, United Way or incorporated community appeal <b>and</b> contributions from all other sources did not exceed \$25,000 <b>or</b> 2) it received all or substantially all of its contributions from a single government agency to which it submitted an annual financial report similar to that required by Article 7-A).	
b. <b>EPTL</b> annual report exemption (EPTL registrants and dual registrants)  Check <input type="checkbox"/> if total gross receipts for this fiscal year did not exceed \$25,000 <b>and</b> the assets (market value) of the organization did not exceed \$25,000 at any time during this fiscal year.	
For EPTL or Article 7-A registrants claiming the annual report exemption under the one law under which they are registered and for dual registrants claiming the annual report exemptions under both laws, simply complete part 1 (General Information), part 2 (Certification) and part 3 (Annual Report Exemption Information) above. <b>Do not</b> submit a fee, <b>do not</b> complete the following schedules and <b>do not</b> submit any attachments to this form.	

**4. Article 7-A Schedules**

If you did <b>not</b> check the Article 7-A annual report exemption above, complete the following for this fiscal year:	
a. Did the organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State?	Yes* <input type="checkbox"/> No <input type="checkbox"/>
* If "Yes", complete Schedule 4a.	
b. Did the organization receive government contributions (grants)?	Yes* <input type="checkbox"/> No <input type="checkbox"/>
* If "Yes", complete Schedule 4b.	

**5. Fee Submitted:** See last page for summary of fee requirements.

Indicate the filing fee(s) you are submitting along with this form:	
a. Article 7-A filing fee	\$ <u>—</u>
b. EPTL filing fee	\$ <u>50</u>
c. <b>Total fee</b>	\$ <u>50</u>

Submit only one check or money order for the total fee, payable to "NYS Department of Law"

**6. Attachments:** For organizations that are not claiming annual report exemptions under both laws, see last page for required attachments.

**Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsels (FRC), Commercial Co-Venturers (CCV)**

If you checked the box in question 4.a. on page 1, complete the following schedule for **each** PFR, FRC or CCV that the organization engaged for fund raising activity in NY State:

**1. Type of fund raising professional (FRP):**

Professional fund raiser ..... ☐  
Fund raising counsel ..... ☐  
Commercial co-venturer ..... ☐

**2. Name of FRP:**

.....  
Number and street (or P.O. box if mail is not delivered to street address):

.....  
City or town, state or country and zip + 4:  
.....

**3. FRP telephone number:****4. Services provided by FRP (provide description):****5. Compensation arrangement with FRP (provide description):**

6. Dates of contract ..... (mm/dd/yyyy) through ..... (mm/dd/yyyy)

7. Amount paid to FRP ..... \$ .....

**Schedule 4b: Government Contributions (Grants).**

If you checked the box in question **4.b.** on page 1, complete the following schedule for **each** government contribution (grant). Use additional copies of this page if necessary to list each government contribution (grant) separately.

[illegible]

## 5. Fee Instructions

The filing fee depends on the organization's Registration Type. For details on Registration Type and filing fees, see the Instructions for Form CHAR500.

Organization's Registration Type	Fee Instructions
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- |                      |  |
|----------------------|--|
| • <b>Article 7-A</b> | Calculate the Article 7-A filing fee using the table in <b>part a</b> below. The EPTL filing fee is \$0.   |
| • <b>EPTL</b>        | Calculate the EPTL filing fee using the table in <b>part b</b> below. The Article 7-A filing fee is \$0.   |
| • <b>Dual</b>        | Calculate both the Article 7-A and EPTL filing fees using the tables in <b>parts a and b</b> below. Add the Article 7-A and EPTL filing fees together to calculate the total fee. Submit a <b>single</b> check or money order for the total fee. |

a) **Article 7-A filing fee**

Total Support & Revenue	Article 7-A Fee
more than \$250,000	\$25
up to \$250,000 *	\$10

\* Any organization that contracted with or used the services of a professional fund raiser (PFR) or fund raising counsel (FRC) during the reporting period must pay an Article 7-A filing fee of \$25, regardless of total support and revenue.

b) **EPTL filing fee**

Net Worth at End of Year	EPTL Fee
Less than \$50,000	\$25
\$50,000 or more, but less than \$250,000	\$50
\$250,000 or more, but less than \$1,000,000	\$100
\$1,000,000 or more, but less than \$10,000,000	\$250
\$10,000,000 or more, but less than \$50,000,000	\$750
\$50,000,000 or more	\$1500

## 6. Attachments – Document Attachment Check-List

Check the boxes for the documents you are attaching.

**For All Filers**

Filing Fee

- ☒ Single check or money order payable to "NYS Department of Law"

Copies of Internal Revenue Service Forms

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> IRS Form 990               | <input type="checkbox"/> IRS Form 990-EZ               | <input type="checkbox"/> IRS Form 990-PF               |
| <input checked="" type="checkbox"/> Schedule A to IRS Form 990 | <input type="checkbox"/> Schedule A to IRS Form 990-EZ |  |
| <input type="checkbox"/> Schedule B to IRS Form 990            | <input type="checkbox"/> Schedule B to IRS Form 990-EZ | <input type="checkbox"/> Schedule B to IRS Form 990-PF |
| <input type="checkbox"/> IRS Form 990-T                        | <input type="checkbox"/> IRS Form 990-T                | <input type="checkbox"/> IRS Form 990-T                |

**Additional Article 7-A Document Attachment Requirement**

Independent Accountant's Report

- ☐ Audit Report (total support & revenue more than \$250,000)
- ☒ Review Report (total support & revenue \$100,001 to \$250,000)
- ☐ No Accountant's Report Required (total support & revenue not more than \$100,000)

Form **990****Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

**2006****Open to Public Inspection**Department of the Treasury  
Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

<b>A</b> For the 2006 calendar year, or tax year beginning <u>November 1</u> , 2006, and ending <u>October 31</u> , 20 <u>07</u>	
<b>B</b> Check if applicable: <input type="checkbox"/> Address changed <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>D</b> Employer identification number <u>16</u>   <u>1605340</u> <b>E</b> Telephone number ( <u>716</u> ) <u>843-5090</u> <b>F</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____
<b>G</b> Website: ► <u>wsgsa.com</u>	
<b>J</b> Organization type (check only one) ► <input checked="" type="checkbox"/> 501(c) ( <u>3</u> ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
<b>K</b> Check here ► <input type="checkbox"/> if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.	
<b>L</b> Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ► <u>129,528</u>	
<b>M</b> Check ► <input checked="" type="checkbox"/> if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).	

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

<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received:			
	<b>a</b> Contributions to donor advised funds	<b>1a</b>		
	<b>b</b> Direct public support (not included on line 1a)	<b>1b</b>	<u>18,094</u>	
	<b>c</b> Indirect public support (not included on line 1a)	<b>1c</b>		
	<b>d</b> Government contributions (grants) (not included on line 1a)	<b>1d</b>	<u>2,718</u>	
	<b>e</b> Total (add lines 1a through 1d) (cash \$ <u>20,812</u> noncash \$ _____)	<b>1e</b>		<u>20,812</u>
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>		<u>82,908</u>
	<b>3</b> Membership dues and assessments	<b>3</b>		
	<b>4</b> Interest on savings and temporary cash investments	<b>4</b>		<u>81</u>
	<b>5</b> Dividends and interest from securities	<b>5</b>		
<b>Expenses</b>	<b>6a</b> Gross rents	<b>6a</b>		
	<b>b</b> Less: rental expenses	<b>6b</b>		
	<b>c</b> Net rental income or (loss). Subtract line 6b from line 6a	<b>6c</b>		
	<b>7</b> Other investment income (describe ►)	<b>7</b>		
	<b>8a</b> Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
	<b>b</b> Less: cost or other basis and sales expenses	<b>8a</b>		
	<b>c</b> Gain or (loss) (attach schedule)	<b>8b</b>		
	<b>d</b> Net gain or (loss). Combine line 8c, columns (A) and (B)	<b>8c</b>		
	<b>8d</b>			
	<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here ► <input checked="" type="checkbox"/>			
<b>Net Assets</b>	<b>a</b> Gross revenue (not including \$ <u>-0-</u> of contributions reported on line 1b)	<b>9a</b>	<u>25,727</u>	
	<b>b</b> Less: direct expenses other than fundraising expenses	<b>9b</b>	<u>9,843</u>	
	<b>c</b> Net income or (loss) from special events. Subtract line 9b from line 9a	<b>9c</b>		<u>15,884</u>
	<b>10a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>		
	<b>b</b> Less: cost of goods sold	<b>10b</b>		
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	<b>10c</b>		
	<b>11</b> Other revenue (from Part VII, line 103)	<b>11</b>		
	<b>12</b> Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	<b>12</b>		<u>119,595</u>
	<b>13</b> Program services (from line 44, column (B))	<b>13</b>		<u>109,514</u>
	<b>14</b> Management and general (from line 44, column (C))	<b>14</b>		<u>2,350</u>
<b>Net Assets</b>	<b>15</b> Fundraising (from line 44, column (D))	<b>15</b>		
	<b>16</b> Payments to affiliates (attach schedule)	<b>16</b>		
	<b>17</b> Total expenses. Add lines 16 and 44, column (A)	<b>17</b>		<u>111,864</u>
	<b>18</b> Excess or (deficit) for the year. Subtract line 17 from line 12	<b>18</b>		<u>7,821</u>
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>		<u>53,134</u>
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	<b>20</b>		
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18, 19, and 20	<b>21</b>		<u>60,955</u>

**Part II** **Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b>	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22a</b>			
<b>22b</b>	Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>22b</b>			
<b>23</b>	Specific assistance to individuals (attach schedule)	<b>23</b>			
<b>24</b>	Benefits paid to or for members (attach schedule)	<b>24</b>			
<b>25a</b>	Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)	<b>25a</b>			
<b>b</b>	Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	<b>25b</b>			
<b>c</b>	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	<b>25c</b>			
<b>26</b>	Salaries and wages of employees not included on lines 25a, b, and c	<b>26</b>			
<b>27</b>	Pension plan contributions not included on lines 25a, b, and c	<b>27</b>			
<b>28</b>	Employee benefits not included on lines 25a - 27	<b>28</b>			
<b>29</b>	Payroll taxes	<b>29</b>			
<b>30</b>	Professional fundraising fees	<b>30</b>			
<b>31</b>	Accounting fees	<b>31</b>	970	0	970
<b>32</b>	Legal fees	<b>32</b>			
<b>33</b>	Supplies	<b>33</b>	1,025	403	622
<b>34</b>	Telephone	<b>34</b>			
<b>35</b>	Postage and shipping	<b>35</b>	39	0	39
<b>36</b>	Occupancy	<b>36</b>	17,520	17,520	0
<b>37</b>	Equipment rental and maintenance	<b>37</b>			
<b>38</b>	Printing and publications	<b>38</b>	454	454	0
<b>39</b>	Travel	<b>39</b>			
<b>40</b>	Conferences, conventions, and meetings	<b>40</b>	265	0	265
<b>41</b>	Interest	<b>41</b>			
<b>42</b>	Depreciation, depletion, etc. (attach schedule)	<b>42</b>	5,551	5,551	0
<b>43</b>	Other expenses not covered above (itemize):				
<b>a</b>	Schedule 2	<b>43a</b>	86,040	85,586	454
<b>b</b>		<b>43b</b>			
<b>c</b>		<b>43c</b>			
<b>d</b>		<b>43d</b>			
<b>e</b>		<b>43e</b>			
<b>f</b>		<b>43f</b>			
<b>g</b>		<b>43g</b>			
<b>44</b>	<b>Total functional expenses.</b> Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	<b>44</b>	111,864	109,514	2,350

**Joint Costs.** Check ☐ if you are following SOP 98-2.Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_; (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

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

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► <u>amateur girls softball program</u>		Program Service Expenses (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts; but optional for others.)
<p>All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)</p> <p><b>a</b> <u>Sponsored girls softball program benefiting 552 girls ages 5 through 18</u></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>		109,514
<p><b>b</b> _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>		
<p><b>c</b> _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>		
<p><b>d</b> _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>		
<p><b>e</b> Other program services (attach schedule)</p> <p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>		
<b>f</b> Total of Program Service Expenses (should equal line 44, column (B), Program services). . . . . ►		109,514

**Part IV Balance Sheets** (See the instructions.)**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>45</b> Cash—non-interest-bearing . . . . .	17,854	<b>45</b>	8,665
	<b>46</b> Savings and temporary cash investments . . . . .	14,033	<b>46</b>	17,200
	<b>47a</b> Accounts receivable . . . . .	<b>47a</b>	<b>47c</b>	
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>47b</b>		
	<b>48a</b> Pledges receivable . . . . .	<b>48a</b>	<b>48c</b>	
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>48b</b>		
	<b>49</b> Grants receivable . . . . .		<b>49</b>	
	<b>50a</b> Receivables from current and former officers, directors, trustees, and key employees (attach schedule) . . . . .		<b>50a</b>	
	<b>b</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule) . . . . .		<b>50b</b>	
	<b>51a</b> Other notes and loans receivable (attach schedule) . . . . .	<b>51a</b>	<b>51c</b>	
	<b>b</b> Less: allowance for doubtful accounts . . . . .	<b>51b</b>		
	<b>52</b> Inventories for sale or use . . . . .		<b>52</b>	
	<b>53</b> Prepaid expenses and deferred charges . . . . .		<b>53</b>	
	<b>54a</b> Investments—publicly-traded securities . . . . . <input type="checkbox"/> Cost <input type="checkbox"/> FMV		<b>54a</b>	
	<b>b</b> Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		<b>54b</b>	
	<b>55a</b> Investments—land, buildings, and equipment: basis . . . . .	<b>55a</b>	<b>55c</b>	
	<b>b</b> Less: accumulated depreciation (attach schedule) . . . . .	<b>55b</b>		
	<b>56</b> Investments—other (attach schedule) . . . . .		<b>56</b>	
	<b>57a</b> Land, buildings, and equipment: basis . . . . .	<b>57a</b> 53,093	<b>57c</b>	
	<b>b</b> Less: accumulated depreciation (attach schedule) . . . . .	<b>57b</b> 18,003		
<b>58</b> Other assets, including program-related investments (describe ► . . . . .)		<b>58</b>		
<b>59</b> <b>Total assets</b> (must equal line 74). Add lines 45 through 58 . . . . .	53,134	<b>59</b>	60,955	
<b>Liabilities</b>	<b>60</b> Accounts payable and accrued expenses . . . . .		<b>60</b>	
	<b>61</b> Grants payable . . . . .		<b>61</b>	
	<b>62</b> Deferred revenue . . . . .		<b>62</b>	
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .		<b>63</b>	
	<b>64a</b> Tax-exempt bond liabilities (attach schedule) . . . . .		<b>64a</b>	
	<b>b</b> Mortgages and other notes payable (attach schedule) . . . . .		<b>64b</b>	
	<b>65</b> Other liabilities (describe ► . . . . .)		<b>65</b>	
	<b>66</b> <b>Total liabilities.</b> Add lines 60 through 65 . . . . .		<b>66</b>	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>			
	<b>67</b> Unrestricted . . . . .	53,134	<b>67</b>	60,955
	<b>68</b> Temporarily restricted . . . . .		<b>68</b>	
	<b>69</b> Permanently restricted . . . . .		<b>69</b>	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.</b>			
	<b>70</b> Capital stock, trust principal, or current funds . . . . .		<b>70</b>	
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund . . . . .		<b>71</b>	
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>72</b>	
	<b>73</b> <b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) . . . . .		<b>73</b>	
	<b>74</b> <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73 . . . . .	53,134	<b>74</b>	60,955

**Part IV-A** Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

<b>a</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>a</b>	n/a
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 12:			
1	Net unrealized gains on investments . . . . .	<b>b1</b>		
2	Donated services and use of facilities . . . . .	<b>b2</b>		
3	Recoveries of prior year grants . . . . .	<b>b3</b>		
4	Other (specify): . . . . .	<b>b4</b>		
	Add lines <b>b1</b> through <b>b4</b> . . . . .		<b>b</b>	
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .		<b>c</b>	
<b>d</b>	Amounts included on Part I, line 12, but not on line <b>a</b> :			
1	Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>		
2	Other (specify): . . . . .	<b>d2</b>		
	Add lines <b>d1</b> and <b>d2</b> . . . . .		<b>d</b>	
<b>e</b>	<b>Total revenue</b> (Part I, line 12). Add lines <b>c</b> and <b>d</b> . . . . . ▶		<b>e</b>	

**Part IV-B** Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

<b>a</b>	Total expenses and losses per audited financial statements . . . . .		<b>a</b>	n/a
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 17:			
1	Donated services and use of facilities . . . . .	<b>b1</b>		
2	Prior year adjustments reported on Part I, line 20 . . . . .	<b>b2</b>		
3	Losses reported on Part I, line 20 . . . . .	<b>b3</b>		
4	Other (specify): . . . . .	<b>b4</b>		
	Add lines <b>b1</b> through <b>b4</b> . . . . .		<b>b</b>	
<b>c</b>	Subtract line <b>b</b> from line <b>a</b> . . . . .		<b>c</b>	
<b>d</b>	Amounts included on Part I, line 17, but not on line <b>a</b> :			
1	Investment expenses not included on Part I, line 6b . . . . .	<b>d1</b>		
2	Other (specify): . . . . .	<b>d2</b>		
	Add lines <b>d1</b> and <b>d2</b> . . . . .		<b>d</b>	
<b>e</b>	<b>Total expenses</b> (Part I, line 17). Add lines <b>c</b> and <b>d</b> . . . . . ▶		<b>e</b>	

**Part V-A** Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
John P. Hess 68 Crystal Lane, West Seneca, NY 14224	President - 15	-0-	-0-	-0-
John Battaglia 63 Creekview, West Seneca, NY 14224	Vice President - 15	-0-	-0-	-0-
Charles A. Krotje 71 Pine Tree Lane, West Seneca, NY 14224	Treasurer - 10	-0-	-0-	-0-
Michael G. DeMarzio 107 Century Drive, West Seneca, NY 14224	Director - 2	-0-	-0-	-0-
John Leininger 257 Woodward, West Seneca, NY 14224	Director - 1	-0-	-0-	-0-
Kenneth L. Switzer 112 Wedgewood Drive, West Seneca, NY 14224	Director - 0	-0-	-0-	-0-

**Part V-A Current Officers, Directors, Trustees, and Key Employees** (continued)

	Yes	No
<b>75a</b> Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings . . . . . 6		
<b>b</b> Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) . . . . .	<b>75b</b>	✓
<b>c</b> Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." . . . . . If "Yes," attach a statement that includes the information described in the instructions.	<b>75c</b>	✓
<b>d</b> Does the organization have a written conflict of interest policy? . . . . .	<b>75d</b>	✓

**Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits** (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances

**Part VI Other Information** (See the instructions.)

	Yes	No
<b>76</b> Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change . . . . .	<b>76</b>	✓
<b>77</b> Were any changes made in the organizing or governing documents but not reported to the IRS? . . . . . If "Yes," attach a conformed copy of the changes.	<b>77</b>	✓
<b>78a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	<b>78a</b>	✓
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>78b</b>	
<b>79</b> Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement . . . . .	<b>79</b>	✓
<b>80a</b> Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? . . . . .	<b>80a</b>	✓
<b>b</b> If "Yes," enter the name of the organization ► . . . . . and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt	<b>81a</b>	
<b>81a</b> Enter direct and indirect political expenditures. (See line 81 instructions.) . . . . .	<b>81b</b>	✓
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .		

**Part VI Other Information** (continued)

		Yes	No
<b>82a</b>	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	✓	
<b>b</b>	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
<b>82b</b>			
<b>83a</b>	Did the organization comply with the public inspection requirements for returns and exemption applications?	✓	
<b>b</b>	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	✓	
<b>83b</b>			
<b>84a</b>	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>84b</b>			
<b>85</b>	<b>501(c)(4), (5), or (6) organizations.</b> <b>a</b> Were substantially all dues nondeductible by members?		
<b>b</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
<b>c</b>	Dues, assessments, and similar amounts from members		
<b>d</b>	Section 162(e) lobbying and political expenditures		
<b>e</b>	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
<b>f</b>	Taxable amount of lobbying and political expenditures (line 85d less 85e)		
<b>g</b>	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
<b>h</b>	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
<b>85a</b>			
<b>85b</b>			
<b>85c</b>			
<b>85d</b>			
<b>85e</b>			
<b>85f</b>			
<b>85g</b>			
<b>85h</b>			
<b>86</b>	<b>501(c)(7) orgs.</b> Enter: <b>a</b> Initiation fees and capital contributions included on line 12		
<b>b</b>	Gross receipts, included on line 12, for public use of club facilities		
<b>86a</b>			
<b>86b</b>			
<b>87</b>	<b>501(c)(12) orgs.</b> Enter: <b>a</b> Gross income from members or shareholders		
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>87a</b>			
<b>87b</b>			
<b>88a</b>	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		✓
<b>b</b>	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		✓
<b>88b</b>			
<b>89a</b>	<b>501(c)(3) organizations.</b> Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ -0-; section 4912 ▶ -0-; section 4955 ▶ -0-		
<b>b</b>	<b>501(c)(3) and 501(c)(4) orgs.</b> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		✓
<b>89b</b>			
<b>c</b>	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		-0-
<b>d</b>	Enter: Amount of tax on line 89c, above, reimbursed by the organization		-0-
<b>e</b>	<b>All organizations.</b> At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		✓
<b>89e</b>			
<b>f</b>	<b>All organizations.</b> Did the organization acquire a direct or indirect interest in any applicable insurance contract?		✓
<b>89f</b>			
<b>g</b>	<b>For supporting organizations and sponsoring organizations maintaining donor advised funds.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>89g</b>			
<b>90a</b>	List the states with which a copy of this return is filed ▶ New York		
<b>b</b>	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)		-0-
<b>90b</b>			
<b>91a</b>	The books are in care of ▶ Charles A. Krotje, Treasurer Telephone no. ▶ ( 716 ) 843-5090 Located at ▶ 71 Pine Tree Lane, West Seneca, NY ZIP + 4 ▶ 14224-4146		
<b>b</b>	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</b>		
<b>91b</b>		Yes	No
			✓

**Part VI Other Information (continued)**

Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** ☐ ☒

If "Yes," enter the name of the foreign country ▶

**92** Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ **92****Part VII Analysis of Income-Producing Activities (See the instructions.)**

Note: Enter gross amounts unless otherwise indicated.

		Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
		(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
<b>93</b>	Program service revenue:					
a	Amateur girls softball					82,908
b						
c						
d						
e						
f	Medicare/Medicaid payments					
g	Fees and contracts from government agencies					
<b>94</b>	Membership dues and assessments			14	81	
<b>95</b>	Interest on savings and temporary cash investments					
<b>96</b>	Dividends and interest from securities					
<b>97</b>	Net rental income or (loss) from real estate:					
a	debt-financed property					
b	not debt-financed property					
<b>98</b>	Net rental income or (loss) from personal property					
<b>99</b>	Other investment income					
<b>100</b>	Gain or (loss) from sales of assets other than inventory					
<b>101</b>	Net income or (loss) from special events			01	15,884	
<b>102</b>	Gross profit or (loss) from sales of inventory					
<b>103</b>	Other revenue: a					
b						
c						
d						
e						
<b>104</b>	Subtotal (add columns (B), (D), and (E))		-0-		15,965	82,908
<b>105</b>	Total (add line 104, columns (B), (D), and (E))					98,873

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)**

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
<b>93a</b>	Practice, games, and competitive tournaments are necessary to teach the game of softball and are also effective ways to teach the importance of teaming and fair play.

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)**

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)**(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

**Part XI** Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).**106** Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	✓

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
<b>Totals</b>				

**107** Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	✓

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
<b>Totals</b>				

**108** Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No
	✓

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

**Please Sign Here**

Signature of officer: Charles A. Krotje Date: February 1, 2008

Type or print name and title: Charles A. Krotje, Treasurer

**Paid Preparer's Use Only**

Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_ Check if self-employed: ☐

Firm's name (or yours if self-employed), address, and ZIP + 4: \_\_\_\_\_ EIN: \_\_\_\_\_

Phone no.: \_\_\_\_\_

Preparer's SSN or PTIN (See Gen. Inst. X): \_\_\_\_\_



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

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),  
or 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information—(See separate instructions.)**

► **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

**2006**

Name of the organization

West Seneca Girls Softball Association, Inc.

Employer identification number

16 : 1605340

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

Total number of other employees paid over \$50,000 . . . ►

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		

Total number of others receiving over \$50,000 for professional services . . . . . ►

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**  
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		

Total number of other contractors receiving over \$50,000 for other services . . . . . ►

**Part III** Statements About Activities (See page 2 of the instructions.)

Yes No

- 1** During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ \_\_\_\_\_ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

1 ✓

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.

- 2** During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

**a** Sale, exchange, or leasing of property?

2a ✓

**b** Lending of money or other extension of credit?

2b ✓

**c** Furnishing of goods, services, or facilities?

2c ✓

**d** Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?

2d ✓

**e** Transfer of any part of its income or assets?

2e ✓

- 3a** Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)

3a ✓

**b** Did the organization have a section 403(b) annuity plan for its employees?

3b ✓

**c** Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement

3c ✓

**d** Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?

3d ✓

- 4a** Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g

4a ✓

**b** Did the organization make any taxable distributions under section 4966?

4b ✓

**c** Did the organization make a distribution to a donor, donor advisor, or related person?

4c ✓

**d** Enter the total number of donor advised funds owned at the end of the tax year ► -0-

**e** Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ► -0-

**f** Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4c) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ► -0-

**g** Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ► -0-

**Part IV Reason for Non-Private Foundation Status** (See pages 4 through 7 of the instructions.)I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶ .....
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 ☐ 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:  
☐ Type I ☐ Type II ☐ Type III-Functionally Integrated ☐ Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
<b>Total</b> . . . . . ▶					

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.****Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
<b>15</b> Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	18,885	19,757	21,112	14,609	74,363
<b>16</b> Membership fees received	0	0	0	0	0
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	18,802	11,928	10,781	8,971	50,48288
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	88	73	62	96	319
<b>19</b> Net income from unrelated business activities not included in line 18.	0	0	0	0	0
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.	0	0	0	0	0
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	0	0	0	0	0
<b>23</b> Total of lines 15 through 22	37,775	31,758	31,955	23,676	125,164
<b>24</b> Line 23 minus line 17	18,973	19,830	21,174	14,705	74,682
<b>25</b> Enter 1% of line 23	377.75	317.58	319.55	236.76	
<b>26 Organizations described on lines 10 or 11:</b>					
<b>a</b> Enter 2% of amount in column (e), line 24					<b>26a</b> 1,493.64
<b>b</b> Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. <b>Do not file this list with your return.</b> Enter the total of all these excess amounts					<b>26b</b> 2,744
<b>c</b> Total support for section 509(a)(1) test: Enter line 24, column (e)					<b>26c</b> 74,682
<b>d</b> Add: Amounts from column (e) for lines: 18 <u>319</u> 19 <u>0</u> 22 <u>0</u> 26b <u>2,744</u>					<b>26d</b> 3,063
<b>e</b> Public support (line 26c minus line 26d total)					<b>26e</b> 71,619
<b>f</b> Public support percentage (line 26e (numerator) divided by line 26c (denominator))					<b>26f</b> 95.8936 %
<b>27 Organizations described on line 12:</b>					
<b>a</b> For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." <b>Do not file this list with your return.</b> Enter the sum of such amounts for each year: (2005) _____ (2004) _____ (2003) _____ (2002) _____					
<b>b</b> For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the <b>larger</b> of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) <b>Do not file this list with your return.</b> After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2005) _____ (2004) _____ (2003) _____ (2002) _____					
<b>c</b> Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					<b>27c</b>
<b>d</b> Add: Line 27a total _____ and line 27b total _____					<b>27d</b>
<b>e</b> Public support (line 27c total minus line 27d total)					<b>27e</b>
<b>f</b> Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					<b>27f</b>
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator))					<b>27g</b> %
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					<b>27h</b> %
<b>28 Unusual Grants:</b> For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. <b>Do not file this list with your return.</b> Do not include these grants in line 15.					

**Part IV Private School Questionnaire** (See page 9 of the instructions.)  
**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

	Yes	No
<b>29</b> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? . . . . .	<b>29</b>	
<b>30</b> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? . . . . .	<b>30</b>	
<b>31</b> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? . . . . . If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) . . . . . . . . . . . . . . .	<b>31</b>	
<b>32</b> Does the organization maintain the following:	<b>32a</b>	
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . .		
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .	<b>32b</b>	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .	<b>32c</b>	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions? . . . . .	<b>32d</b>	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) . . . . . . . . . . . . . . .		
<b>33</b> Does the organization discriminate by race in any way with respect to:		
<b>a</b> Students' rights or privileges? . . . . .	<b>33a</b>	
<b>b</b> Admissions policies? . . . . .	<b>33b</b>	
<b>c</b> Employment of faculty or administrative staff? . . . . .	<b>33c</b>	
<b>d</b> Scholarships or other financial assistance? . . . . .	<b>33d</b>	
<b>e</b> Educational policies? . . . . .	<b>33e</b>	
<b>f</b> Use of facilities? . . . . .	<b>33f</b>	
<b>g</b> Athletic programs? . . . . .	<b>33g</b>	
<b>h</b> Other extracurricular activities? . . . . .	<b>33h</b>	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) . . . . . . . . . . . . . . .		
<b>34a</b> Does the organization receive any financial aid or assistance from a governmental agency? . . . . .	<b>34a</b>	
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? . . . . . If you answered "Yes" to either 34a or b, please explain using an attached statement.	<b>34b</b>	
<b>35</b> Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation . . . . .	<b>35</b>	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 10 of the instructions.)  
(To be completed **ONLY** by an eligible organization that filed Form 5768)Check **a** ☐ if the organization belongs to an affiliated group. Check **b** ☐ if you checked "a" and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
<b>36</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .	<b>36</b>	
<b>37</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	<b>37</b>	
<b>38</b>	Total lobbying expenditures (add lines 36 and 37) . . . . .	<b>38</b>	
<b>39</b>	Other exempt purpose expenditures . . . . .	<b>39</b>	
<b>40</b>	Total exempt purpose expenditures (add lines 38 and 39) . . . . .	<b>40</b>	
<b>41</b>	Lobbying nontaxable amount. Enter the amount from the following table— <div style="display: flex; justify-content: space-between;"> <div> <b>If the amount on line 40 is—</b>            Not over \$500,000 . . . . .            Over \$500,000 but not over \$1,000,000 . . . . .            Over \$1,000,000 but not over \$1,500,000 . . . . .            Over \$1,500,000 but not over \$17,000,000 . . . . .            Over \$17,000,000 . . . . .         </div> <div> <b>The lobbying nontaxable amount is—</b>            20% of the amount on line 40 . . . . .            \$100,000 plus 15% of the excess over \$500,000 . . . . .            \$175,000 plus 10% of the excess over \$1,000,000 . . . . .            \$225,000 plus 5% of the excess over \$1,500,000 . . . . .            \$1,000,000 . . . . .         </div> </div>	<b>41</b>	
<b>42</b>	Grassroots nontaxable amount (enter 25% of line 41). . . . .	<b>42</b>	
<b>43</b>	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36. . . . .	<b>43</b>	
<b>44</b>	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38. . . . .	<b>44</b>	

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.

**4-Year Averaging Period Under Section 501(h)**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  
See the instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ►	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
<b>45</b> Lobbying nontaxable amount . . . . .					
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					
<b>47</b> Total lobbying expenditures . . . . .					
<b>48</b> Grassroots nontaxable amount . . . . .					
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					
<b>50</b> Grassroots lobbying expenditures . . . . .					

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
<b>a</b> Volunteers . . . . .		✓	
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines <b>c</b> through <b>h</b> .) . . . . .		✓	
<b>c</b> Media advertisements . . . . .		✓	
<b>d</b> Mailings to members, legislators, or the public . . . . .		✓	
<b>e</b> Publications, or published or broadcast statements . . . . .		✓	
<b>f</b> Grants to other organizations for lobbying purposes . . . . .		✓	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body . . . . .		✓	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means . . . . .		✓	
<b>i</b> Total lobbying expenditures (Add lines <b>c</b> through <b>h</b> .) . . . . .			-0-

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

- |          |  | Yes    | No |
|----------|--|--------|----|
| <b>a</b> | Transfers from the reporting organization to a noncharitable exempt organization of:   |        |    |
|          | (i) Cash   | 51a(i) | ✓  |
|          | (ii) Other assets  | a(ii)  | ✓  |
| <b>b</b> | Other transactions:  |        |    |
|          | (i) Sales or exchanges of assets with a noncharitable exempt organization  | b(i)   | ✓  |
|          | (ii) Purchases of assets from a noncharitable exempt organization  | b(ii)  | ✓  |
|          | (iii) Rental of facilities, equipment, or other assets   | b(iii) | ✓  |
|          | (iv) Reimbursement arrangements  | b(iv)  | ✓  |
|          | (v) Loans or loan guarantees   | b(v)   | ✓  |
|          | (vi) Performance of services or membership or fundraising solicitations  | b(vi)  | ✓  |
|          | <b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees  | c      | ✓  |
| <b>d</b> | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: |        |    |

[illegible]

- 52a** Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule:

[illegible]

West Seneca Girls Softball Association, Inc.

EIN 16-1605340

Form 990

For the tax year beginning November 1, 2006 and ending October 31, 2007

Schedule 1 - Part I, Line 9, Special Events and Activities:

	<u>Concession Stand</u>	<u>Raffle</u>	<u>Spring Social</u>	<u>All Other</u>	<u>Total</u>
Gross receipts	\$ 3,565	\$ 10,335	\$ 9,663	\$ 2,164	\$ 25,727
Less: contributions	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
Gross revenue	3,565	10,335	9,663	2,164	25,727
Less: direct expenses	<u>3,165</u>	<u>4,181</u>	<u>2,498</u>	<u>-</u>	<u>9,844</u>
Net income (loss)	<u>\$ 400</u>	<u>\$ 6,154</u>	<u>\$ 7,165</u>	<u>\$ 2,164</u>	<u>\$ 15,883</u>

West Seneca Girls Softball Association, Inc.

EIN 16-1605340

Form 990

For the tax year beginning November 1, 2006 and ending October 31, 2007

Schedule 2 - Part II, Line 43, Other expenses:

	(A) Total	(B) Program Services	(C) Management and general	(D) Fundraising
Player uniforms	\$ 29,632	\$ 29,632	\$ -	\$ -
Awards and banquet	10,098	10,098	-	-
Umpires	16,606	16,606	-	-
Tournaments & team registration	16,200	16,200	-	-
Insurance	2,938	2,938	-	-
Website	120	-	120	-
Non-umpire tournament costs	3,026	3,026	-	-
Clinics and player conditioning	1,500	1,500	-	-
Credit card fees	284	-	284	-
Storage	520	520	-	-
Sponsor banners and plaques	1,494	1,494	-	-
Miscellaneous	3,622	3,572	50	-
Total other expenses	<u>\$ 86,040</u>	<u>\$ 85,586</u>	<u>\$ 454</u>	<u>\$ -</u>

West Seneca Girls Softball Association, Inc.

EIN 16-1605340

Form 990

For the tax year beginning November 1, 2006 and ending October 31, 2007

Schedule 3 - Part IV, Line 57, Land, Buildings, and Equipment:

	Beginning of Year			End of Year		
	Cost	Accumulated Depreciation	Net Book Value	Cost	Accumulated Depreciation	Net Book Value
Softball equipment	\$ 19,518	\$ (14,677)	\$ 4,841	\$ 14,257	\$ (11,441)	\$ 2,816
Softball field improvements	20,026	(3,620)	16,406	35,836	(6,562)	29,274
Total	<u>\$ 39,544</u>	<u>\$ (18,297)</u>	<u>\$ 21,247</u>	<u>\$ 50,093</u>	<u>\$ (18,003)</u>	<u>\$ 32,090</u>



**GOULD & SWANSON, P.C.**

CERTIFIED PUBLIC ACCOUNTANTS

**West Seneca Girls Softball Association, Inc.**

Financial Statements  
with  
Accountants' Review Report

October 31, 2007 and 2006

# West Seneca Girls Softball Association, Inc.

## Financial Statements

October 31, 2007 and 2006

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# GOULD & SWANSON, P.C.

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Daniel E. Connell, CPA  
Joseph M. Becht, CPA

Robert K. Gould, CPA  
(1915 - 1994)  
Roger C. Swanson, CPA  
(1927-1997)

### Accountants' Review Report

The Board of Directors  
West Seneca Girls Softball Association, Inc.

We have reviewed the accompanying statements of assets, liabilities, and net assets – cash basis of West Seneca Girls Softball Association, Inc. (a nonprofit organization) as of October 31, 2007 and 2006, and the related statements of revenue collected and expenses paid and cash flows – cash basis for the years then ended, in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. All information included in these financial statements is the representation of the management of West Seneca Girls Softball Association, Inc. The prior year summarized comparative information has been derived from the Association's October 31, 2006 financial statements, and in our report dated June 4, 2007, based on our review, we were not aware of any material modifications that should have been made to the financial statements in order for them to be in conformity with the cash basis of accounting.

A review consists principally of inquiries of Association personnel and analytical procedures applied to financial data. It is substantially less in scope than an audit in accordance with generally accepted auditing standards, the objective of which is the expression of an opinion regarding the financial statements taken as a whole. Accordingly, we do not express such an opinion.

Based on our review, we are not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in conformity with the cash basis of accounting, as described in Note 2.

*Gould & Swanson, P.C.*

January 24, 2008

West Seneca Girls Softball Association, Inc.  
Statements of Assets, Liabilities, and Net Assets – Cash Basis  
October 31, 2007 and 2006

	<u>2007</u>	<u>2006</u>
Assets:		
Cash	\$ 25,865	\$ 31,887
Softball field improvements and equipment:		
Softball field improvements, at cost	35,836	20,026
Equipment, at cost	<u>17,257</u>	<u>19,518</u>
Total	53,093	39,544
Accumulated depreciation	<u>(18,003)</u>	<u>(18,297)</u>
Net	<u>35,090</u>	<u>21,247</u>
Total assets	<u>\$ 60,955</u>	<u>\$ 53,134</u>
Net assets:		
Unrestricted	<u>\$ 60,955</u>	<u>\$ 53,134</u>

West Seneca Girls Softball Association, Inc.  
Statements of Revenue Collected and Expenses Paid – Cash Basis  
For the Years Ended October 31, 2007 and 2006

	<u>2007</u>	<u>2006</u>
Revenues collected:		
Contributions	\$ 20,812	\$ 18,885
Program service revenue	82,908	75,736
Special event revenue	25,727	17,782
Interest income	<u>81</u>	<u>88</u>
Total revenue	<u>129,528</u>	<u>112,491</u>
Expenses paid:		
Program services	109,514	99,309
Special events expenses	9,843	7,293
Management and general	<u>2,350</u>	<u>1,234</u>
Total expenses	<u>121,707</u>	<u>107,836</u>
Increase in net assets	7,821	4,655
Net assets at beginning of year	<u>53,134</u>	<u>48,479</u>
Net assets at end of year	<u>\$ 60,955</u>	<u>\$ 53,134</u>

West Seneca Girls Softball Association, Inc.  
 Statements of Cash Flows – Cash Basis  
 For the Years Ended October 31, 2007 and 2006

	<u>2007</u>	<u>2006</u>
Cash flows from operating activities:		
Increase in net assets	\$ 7,821	\$ 4,655
Depreciation	<u>5,551</u>	<u>4,591</u>
Cash flows provided by operating activities	<u>13,372</u>	<u>9,246</u>
 Cash flows from investing activities:		
Purchases of equipment	<u>(19,394)</u>	<u>(11,272)</u>
Cash flows used in investing activities	<u>(19,394)</u>	<u>(11,272)</u>
Decrease in cash	(6,022)	(2,026)
 Cash at beginning of year	<u>31,887</u>	<u>33,913</u>
Cash at end of year	<u>\$ 25,865</u>	<u>\$ 31,887</u>

West Seneca Girls Softball Association, Inc.  
Statements of Functional Expenses – Cash Basis  
For the Years Ended October 31, 2007 and 2006

	2007				2006
	Program Services	Management and General	Special Events	Total	Total
Player uniforms	\$ 29,632	\$ -	\$ -	\$ 29,632	\$ 27,077
Occupancy	17,520	-	-	17,520	16,194
Tournament fees and team registrations	16,200	-	-	16,200	14,393
Umpires	16,606	-	-	16,606	13,658
Awards and banquet	10,098	-	-	10,098	12,351
Depreciation	5,551	-	-	5,551	4,591
Insurance	2,938	-	-	2,938	2,938
Non-umpire tournament costs	3,026	-	-	3,026	2,268
Clinics and player conditioning	1,500	-	-	1,500	1,740
Sponsor banners and plaques	1,494	-	-	1,494	1,408
Storage	520	-	-	520	440
Accounting fees	-	970	-	970	-
Supplies	403	622	-	1,025	448
Postage and shipping	-	39	-	39	301
Printing and publications	454	-	-	454	283
Credit card fees	-	284	-	284	310
Meetings	-	265	-	265	250
Website	-	120	-	120	150
Special events	-	-	9,843	9,843	7,293
Miscellaneous	3,572	50	-	3,622	1,743
	<u>\$ 109,514</u>	<u>\$ 2,350</u>	<u>\$ 9,843</u>	<u>\$ 121,707</u>	<u>\$ 107,836</u>

West Seneca Girls Softball Association, Inc.  
Notes to Financial Statements  
October 31, 2007 and 2006

**1. Description of Association**

The West Seneca Girls Softball Association, Inc. (the "Association") is a not-for-profit organization incorporated under the New York State Corporation Laws and organized to promote, develop, supervise, and voluntarily assist in a girls softball program, for the purpose of providing girls and young women through age 18 with an opportunity to learn and grow through team sports. The Association is dedicated to helping youths become good citizens and providing an outlet of healthful activity and training under good leadership in an atmosphere of wholesome community participation. The players are provided an opportunity to learn the game of softball while also learning about, and experimenting with, working as a member of a team. The Association is a not-for-profit corporation as described in Section 501(c)(3) of the Internal Revenue Code (the "Code") and is exempt from income taxes on related income under Section 501(a) of the Code.

The Association's primary sources of funding are program service revenue and contributions from local businesses.

The Association is affiliated with the Town of West Seneca, New York Recreation Department and uses softball diamonds owned by the Town of West Seneca.

**2. Summary of Significant Accounting Policies**

**Basis of Presentation**

The Association's financial statements are presented on the cash basis of accounting. Revenues are recorded when collected and expenses are recorded when paid. Expenditures for equipment are capitalized when paid.

The Association's net assets and revenues, expenses, gains, and losses are classified based on the existence or absence of imposed restrictions. Accordingly, the net assets of the Association and changes therein are classified and reported as follows:

Unrestricted net assets – Net assets that are not subject to donor-imposed restrictions.

Temporarily restricted net assets – Net assets subject to donor-imposed restrictions that will be met either by actions of the Organization and/or the passage of time.

Permanently restricted net assets – Net assets subject to donor-imposed restrictions that they be maintained permanently by the Organization. The Association held no permanently restricted net assets at October 31, 2007 and 2006.

West Seneca Girls Softball Association, Inc.  
Notes to Financial Statements  
October 31, 2006 and 2007

**2. Summary of Significant Accounting Policies (continued)**

Expenses are reported as decreases in unrestricted net assets. Expirations of temporary restrictions on net assets (i.e. the stipulated purpose has been fulfilled and/or the stipulated time period has elapsed), except for those restrictions met in the same year as received, which are reported as revenues of the unrestricted net asset class, are reported as net assets released from restrictions.

**Contributions and Donated Services**

The Association receives a significant amount of donated services from unpaid volunteers who assist in special events. No amounts have been recognized in the statement of activities because the criteria for recognition under SFAS No. 116 have not been satisfied.

**Use of Estimates**

The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

**Concentration of Credit Risk**

Financial instruments which potentially expose the Association to concentrations of credit risk include cash. The Association's cash deposits are less than the federally insured limits.

**Softball Field Improvements and Equipment**

Equipment is recorded at cost. Depreciation is provided for using declining balance methods over the estimated useful lives of the equipment as follows: softball equipment – 5 years, softball field improvements – 15 years.

West Seneca Girls Softball Association, Inc.  
Notes to Financial Statements  
October 31, 2006 and 2007

### 3. Special Events

Special event activity is summarized as follows:

	Year ended October 31, 2007			Year ended October 31, 2006		
	Revenue	Expense	Net	Revenue	Expense	Net
Concession stand	\$ 3,565	\$ 3,165	\$ 400	\$ 3,056	\$ 2,954	\$ 102
Raffle	10,335	4,181	6,154	6,090	2,310	3,780
Spring Social	9,663	2,497	7,166	6,611	1,174	5,437
Other special events	<u>2,164</u>	<u>-</u>	<u>2,164</u>	<u>2,025</u>	<u>855</u>	<u>1,170</u>
Total	<u>\$ 25,727</u>	<u>\$ 9,843</u>	<u>\$ 15,884</u>	<u>\$ 17,782</u>	<u>\$ 7,293</u>	<u>\$ 10,489</u>

Concession stand – at certain times throughout the softball season, including during Association-sponsored tournaments, the Association offers a concession stand, providing limited food, drinks and other refreshments.

Raffle – the Association sponsors a raffle based on the New York State Lottery numbers, generally once or twice per year.

Spring Social – once per year, the Association sponsors a social gathering. The Association generally provides entertainment and limited beverages, and there are generally various items auctioned, which are provided by donors.