Intern	al Revenu	ue Service	► Informa	ation about Form 990 and its instruction	ons is at www.irs.g	ov/form	n990.		1	nspection
Α	For the	2013 calenda	ar year, or tax year begin	nning	, 2013, and e	ending		_	, 20	
_		applicable:		NASHVILLE SPORTS LEAGUE INC	· · ·	ž			D Employer	identification no.
	Address of		Doing Business As						62-17207	
	Name cha	÷		pox if mail is not delivered to street address)		Room/s	suite		E Telephone	
	Initial retu	-	P O BOX 50710	·····,					(615)390	
	Terminate			e, country, and ZIP or foreign postal code						78,196
	Amended								G Gross rece	
		-	NASHVILLE, TN 37						G GIUSS TECE	ipis a
	Applicatio	on pending				H(a)) Is this a gr subordinat	oup re	turn for	Yes X No
				RIVE, NASHVILLE, TN 37221					r	
) (insert no.) 4947(a)(1) or	527	H(b)) Are all sub If "No," att	ordina ach a l	ites included? list. (see instruction number	Yes No tions)
-	Website:		WNSL.ORG			H(c)				
				sociation 🗌 Other 🕨	L Year of formation:	1997	M State	of leg	al domicile:	TN
Pa	rt I	Summary								
	1	2	U U	• <u> </u>	CORGANIZATION'	S SOLE	E PURPOS	EIS	5 TO OPER	ATE
ø				LEAGUES IN THE NASHVILLE, TEN			RGANIZAT			
anc		CURRENTLY	HAS SIX PROGRAMS C	CONSISTING OF WINTER AND SUMME	R BASKETBALL,	SPRING	G AND FA	LL		
ern			FLAG FOOTBALL AND							
Š	2	Check this bo	x ▶ ☐ if the organization	n discontinued its operations or disposed o	of more than 25% of i	its net as	ssets.		1	
∞ ∞	3	Number of vo	oting members of the govern	ning body (Part VI, line 1a)				3		12
Activities & Governance	4	Number of ind	dependent voting members	s of the governing body (Part VI, line 1b)	• • • • • • •			4		9
viti	5	Total number	of individuals employed in	calendar year 2013 (Part V, line 2a)				5		2
∖cti	6	Total number	r of volunteers (estimate if n	necessary)				6		10
٩	7a	Total unrelate	ed business revenue from F	Part VIII, column (C), line 12				7a		0
	b	Net unrelated	d business taxable income f	from Form 990-T, line 34				7b		0
							Prior Year		Curr	rent Year
Revenue	8	Contributions	and grants (Part VIII, line 1	1h)			124	1, 71	0	46,565
	9		vice revenue (Part VIII, line :	,			1,03			1,002,626
	10	0	ncome (Part VIII, column (A)					22		477
Re	11							1,88		14,187
	12			must equal Part VIII, column (A), line 12)	- F		1,16	-		1,063,855
	13		imilar amounts paid (Part IX	, , ,			-,			
	14		to or for members (Part IX,							0
	15	•		benefits (Part IX, column (A), lines 5-10)			10	5,34	5	96,063
es			fundraising fees (Part IX, co		f		10.	J,J4	<u> </u>	0
Expenses			sing expenses (Part IX, colu							
ğ			9 1 1	· · · · · ·					0	
ш			ses (Part IX, column (A), line		•••••			L,74		925,119
				equal Part IX, column (A), line 25)				7,09		1,021,182
- 0	19	Revenue less	s expenses. Subtract line 1	18 from line 12				1,83		42,673
ts o ance					-	Beginnir	ng of Curren			d of Year
Net Assets or Fund Balances	20		(Part X, line 16)				488	3,63	0	531,303
Vet /	21		s (Part X, line 26)							0
			fund balances. Subtract lin	ne 21 from line 20			488	3,63	0	531,303
	rt II		re Block							
				urn, including accompanying schedules and stateme ficer) is based on all information of which preparer has a schedule and schedule and schedule and schedule and schedule and schedule ficer) is based on all information of which preparer has a schedule and schedul		/ knowledg	je and belief,	it is		
0:			f TYGARD							
Sig		Signatur	re of officer					Dat	e	
Her	e	SCOTT	TYGARD, PRESIDENT							
		Type or	print name and title	1						
		Print/Type pre	parer's name	Preparer's signature	Date		Check X	if	PTIN	
Pai	d	ROBERT S	3 DIXON	ROBERT S DIXON	08-11-2014		self-employ	ed	P01387	764
Pre	parer	Firm's name	R SCOTT I	DIXON CPA		Firm's	EIN 🕨			
	Only		ѕ ▶ 812 18тн	AVENUE SOUTH NO 12		Phone	no.			
			NASHVILL	E TN 37203			61	15-2	56-2260	
May	the IRS	discuss this re	eturn with the preparer sho	wn above? (see instructions)		· · · ·			X 1	res 🗌 No
			on Act Notice, see the se							orm 990 (2013)
	-		,	-						

Return of Organization Exempt From Income Tax

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

> Do not enter Social Security numbers on this form as it may be made public.

990

Department of the Treasury

Form

EEA

OMB No. 1545-0047

2013

Open to Public

Form	1990 (2013) West nashville sports league inc	62-1720706	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
	THE ORGANIZATION'S SOLE PURPOSE IS TO OPERATE YOUTH SPORTS AND RECREATION LEAGUES IN TH		
	NASHVILLE, TENNESSEE AREA. THE ORGANIZATION CURRENTLY HAS SIX PROGRAMS CONSISTING OF W	INTER	
	AND SUMMER BASKETBALL, SPRING AND FALL BASEBALL, FLAG FOOTBALL AND LACROSSE.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	🗌 Yes	x No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	_	_
	services?	🗌 Yes	x No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by		
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.		
	ine total expenses, and revenue, in any, for each program service reported.		
4a	(Code:) (Expenses \$ 313,983 including grants of \$) (Revenue	\$ 40	2,408)
	PROMOTION OF SPORTSMANSHIP THROUGH YOUTH WINTER BASKETBALL PROGRAM		,
4b	(Code:) (Expenses \$248,721 including grants of \$) (Revenue	\$34	0,673)
	PROMOTION OF SPORTSMANSHIP THROUGH YOUTH SPRING BASEBALL PROGRAM		
4c	(Code:) (Expenses \$73,277 including grants of \$) (Revenue	\$16	4,054)
	PROMOTION OF SPORTSMANSHIP THROUGH YOUTH FLAG FOOTBALL PROGRAM		
4d	Other program services. (Describe in Schedule O.)		
40		491)	
<u>4e</u>	Total program service expenses 718,882		

	1990 (2013) WEST NASHVILLE SPORTS LEAGUE INC 62-17207(6	F	Page 3
Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
ŭ	complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more			
~	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
Ŭ	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ь	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			- 23
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f e	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	TIE		- 25
•		115		x
100	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a		12-	х	
	Schedule D, Parts XI and XII	12a		
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	400		- v
40	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			37
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes" complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

	990 (2013) WEST NASHVILLE SPORTS LEAGUE INC 62-172070	6	F	Page 4
Pa	TTIV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Scheudle I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
200	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	200		
D.	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	230		
26				
	current or former officers, directors, trustees, key employees, highest compensated employees, or			v
07	disqualified persons? If so, complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			37
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b	Х	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
-	or IV, and Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	555		
55	related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
27		30		- 27
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			v
		37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		v	1
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
EEA		Form	1 990 (2013)

Form	990 (2013) WEST NASHVILLE SPORTS LEAGUE INC	62-1720706	F	Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	88		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1 c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	2		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	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)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?			X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form	990 (2013) WEST NASHVILLE SPORTS LEAGUE INC 62-172070	6	P	age 6
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No) "		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			_
	Check if Schedule O contains a response or note to any line in the Part VI			. X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	_		37
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			37
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following:	0.	v	
a L	The governing body?	8a	X X	
b	Each committee with authority to act on behalf of the governing body?	8b	Λ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Sec	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Λ
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	163	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100		- 23
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	· · · u		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		X
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed TN			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply.			
	🗌 Own website 🕅 Another's website 🖾 Upon request 🗌 Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
	financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization:			
	SANDI TYGARD (615)390-0328, 6504 RADCLIFF DRIVE, NASHVILLE, TN 37221			

Form 990 (2013) WEST NASHVILLE SPORTS LEAGUE INC	62-1720706	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Com	pensated Employe	es, and
	Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		🗌
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete the organization's ta	nis table for all persons required to be listed. Report compensation for the calendar year ending with or v x year.	within the	
	the organization's current officers, directors, trustees (whether individuals or organizations), regardless Enter -0- in columns (D), (E), and (F) if no compensation was paid.	of amount of	

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A)	(B)			(C	;)			(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for				ore th	an one both an		Reportable compensation from the organization	Reportable compensation from related organizations	Estimated amount of other compensation
	related organizations below dotted line)	6 Individual trustee or director	n Institutional trustee	a dire Officer	tor/t Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) SCOTT TYGARD PRESIDENT/DIRECTOR	40.00	х		X				60,352	0	0
(2) BOB NOTESTINE VICE PRESIDENT/DIRECTOR		Х		х				0	0	0
(3) ANDREW KELSO		Х						0	0	0
(4) DEBBIE SANDWITH DIRECTOR		Х						0	0	0
(5) JOHN HARTONG SEC TREAS/DIRECTOR		Х		Х				0	0	0
(6) ALLISON DUFFEY DIRECTOR		Х						0	0	0
(7) RICHARD CUMMINGS DIRECTOR		Х						0	0	0
(8) BOB STARNES DIRECTOR		Х						0	0	0
(9) MELISSA SMITH DIRECTOR		Х						0	0	0
(10) TILLMAN PAYNE DIRECTOR		Х						0	0	0
(11) RICK NICKELS DIRECTOR		Х						0	0	0
(12) BILL EASTERLY DIRECTOR		Х						0	0	0
(13)										
<u>(14)</u>										

	90 (2013)	WEST NASHVILLE SPORTS	LEAGUE I	NC							62-172070	6	P	age 8
Part	VII	Section A. Officers, Directors, Trustees,	Key Emplo	yees,	and	Hig	hes	t Com	npen	sated Employees	(continued)			
		(A) Name and title	(B) Average hours per week (list any hours for	box, office	unless r and	s pers direc	tion ore th on is tor/tru	,		(D) Reportable compensation from the	(E) Reportable compensation from related organizations	ai con	(F) stimated nount of other npensatio	
			related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org	rom the ganizatio d related anizatior	d
<u>(15)</u>														
(16)														
<u>(17)</u>														
<u>(18)</u>														
<u>(</u> 1 <u>9</u>)														
(20)														
<u>(21)</u>														
<u>(24)</u>														
(25)														
1b	Sub-to			•••	•••	•••	•••							
C		om continuation sheets to Part VII, Sectio	nA.	•••	•••	•••	•••			60.050				•
d 2	•	Idd lines 1b and 1c)							▶ a tha	60,352	0			0
2		ble compensation from the organization		above	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			amon		1 \$ 100,000 O	0			
													Yes	No
3		organization list any former officer, director ee on line 1a? If "Yes," complete Schedule J fo		-	nplo	yee,	or h	nighes	t cor	npensated		3		Х
4		individual listed on line 1a, is the sum of repor			and	othe	· · er co	mpens	••• satio	· · · · · · · · · · · · · · · · · · ·		3		21
	-	ation and related organizations greater than \$1												
_	individu				•••	•••	•••	•••	•••			4		Х
5		person listed on line 1a receive or accrue corr ces rendered to the organization? If "Yes," cor	•					-	tion			5		Х
Secti		ndependent Contractors			01 30		0130	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		• • • • • • • • •		5		
1		te this table for your five highest compensated	independent	t contra	actor	s tha	t rec	ceived	more	e than \$100,000 of				
	comper year.	sation from the organization. Report compens	ation for the	calend	ar ye	ear e	ndin	g with	or w	ithin the organizatio	n's tax			
		(A)								(B)			(C)	-
		Name and business address								Description of s		Com	ensatior	
-														
2		mber of independent contractors (including bu d more than \$100,000 of compensation from th			e liste	ed al	bove	e) who	_					

	0 (201 VIII	Statement of Revenu		S LEAGUE INC			62-172070	os Pag
		Check if Schedule O contains	s a response or r	note to any line in this I	Part VIII			
				İ	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512-514
ItS	1a	Federated campaigns	1	a				
and Other Similar Amounts	b	Membership dues	1	b				
Ê	c	Fundraising events	1	c				
ar	d	Related organizations	1	d				
Ē	е	Government grants (contributio	ns) <u>1</u>	e				
ິ ທີ	f	All other contributions, gifts, gra	ints,					
Ĩ		and similar amounts not include	ed above 1	f 46,565				
ğ	g	Noncash contributions included						
ar	h	Total. Add lines 1a-1f		<u></u>	46,565			
				Business Code				
	2a	WINTER BASKETBALL		711210	402,408	402,408		
	b	SPRING BASEBALL		711210	340,672	340,672		
	C	FLAG FOOTBALL		711210	164,054	164,054		
		FALL BASEBALL		711210	56,331	56,331		
	e	SUMMER BASKETBALL		711210	35,276	35,276		
	1	All other program service revenu			3,885	3,885		
	g	Total. Add lines 2a-2f			1,002,626			
		Investment income (including div						
		and other similar amounts) .			477	477		
	1	Income from investment of tax-e	• •					
	5	Royalties		<u></u>				
		-	(i) Real	(ii) Personal	-			
		Gross rents			-			
		Less: rental expenses			-			
	1	Rental income or (loss)						
		Net rental income or (loss) .	1	· · · · · · · · •				
		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other	-			
		Less: cost or other basis and sales expenses						
		Gain or (loss)						
	1	Net gain or (loss)		· <u>· · · · · · · · · · · · · · · · · · </u>				
		Gross income from fundraising						
		events (not including \$						
		of contributions reported on line	,					
	1	See Part IV, line 18						
)		Less: direct expenses		b 14,341				
		Net income or (loss) from fundra	-		12,480			12,
	1	Gross income from gaming activ						
	1	See Part IV, line 19			-			
	1	Less: direct expenses		b >	-			
		Net income or (loss) from gamin	gactivities .	· · · · · · · · •				
		0		b				
	C	Net income or (loss) from sales of	of inventory .	<u> •</u>				
		Miscellaneous Revenue		Business Code				
		NON PROGRAM FIELD RENT		711210	160	160		
		PITCHING MACHINE RECPT	5	711210	1,547	1,547		
	C L				++			
		All other revenue		L	4 80-			
	· •	Total. Add lines 11a-11d .		7	1,707			1

Form 990 (2013)

WEST NASHVILLE SPORTS LEAGUE INC

Part IX **Statement of Functional Expenses** $(-1)^{-1} = (-1)$

	Check if Schedule O contains a response or note to any l			<u>.</u>	
	ot include amounts reported on lines 6b, 7b, bb, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and		expenses	general expenses	expenses
	organizations in the United States. See Part IV, line 21				
	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors,				
	trustees, and key employees	60,352		60,352	
	Compensation not included above, to disqualified	00,002		00,002	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
,	Other salaries and wages	30,162		30,162	
	Pension plan accruals and contributions (include	507102		507102	
	section 401(k) and 403(b) employer contributions (include				
)	Other employee benefits				
,)	Payroll taxes	5,549		E E40	
	Fees for services (non-employees):	5,549		5,549	
1					
a h					
b		5,055		5,055	
c d	Accounting	5,055		5,055	
	Professional fundraising services. See Part IV, line 17				
e f	-				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
•	(A) amount, list line 11g expenses on Schedule O.)				
2	Advertising and promotion	9,932		9,932	
3		5,834	911	4,923	
4		5,197		5,197	
5	Royalties				
6					
7					
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
D		79		79	
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	20,862		20,862	
3		19,417		19,417	
ŧ	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	CONTRACT LABOR	418,527	328,709	89,818	
b	UNIFORMS	115,588	115,588		
С	GYMNASIUM AND FIELD RENTAL	64,087	64,087		
d	CONCESSIONS EXPENSE	55,472	55,472		
е	All other expenses	205,069	154,115	50,954	
5	Total functional expenses. Add lines 1 through 24e .	1,021,182	718,882	302,300	
6	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

Page 11

art X	Balance Sheet		2-17207	
	Check if Schedule O contains a response or note to any line in this Part X			
		(A)		(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing	109,212	1	81,49
2	Savings and temporary cash investments	330,748	2	400,04
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees.			
	Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
	sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
	organizations (see instructions). Complete Part II of Schedule L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
8	Prepaid expenses and deferred charges		9	
10a				
	other basis. Complete Part VI of Schedule D 10a 177,388			
k		48,670	10c	49,76
11	Investments - publicly traded securities		11	
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14			14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	488,630	16	531,30
17	Accounts payable and accrued expenses	100,000	17	551750
18	Grants payable		18	
19			10	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		20	
22	Loans and other payables to current and former officers, directors,		21	
~~~~				
	trustees, key employees, highest compensated employees, and		22	
22	disqualified persons. Complete Part II of Schedule L		22 23	
23	Secured mortgages and notes payable to unrelated third parties			
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X		05	
			25	
26	Total liabilities. Add lines 17 through 25       Second seco	0	26	
	Organizations that follow SFAS 117 (ASC 958), check here <b>X</b> and			
07	complete lines 27 through 29, and lines 33 and 34.	468.082	07	400.14
27		467,273	27	489,12
28	Temporarily restricted net assets	21,357	28	42,17
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here			
	complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	488,630	33	531,30
34	Total liabilities and net assets/fund balances	488,630	34	531,30

Form 990 (2013)

Form	990 (2013) WEST NASHVILLE SPORTS LEAGUE INC	62-1720706		Pa	age <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1	1,	063,	855
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	1,	021,	182
3	Revenue less expenses. Subtract line 2 from line 1	. 3		42,	673
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4		488,	630
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	. 6			
7	Investment expenses	. 7			
8	Prior period adjustments	. 8			
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	. 10		531,	303
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>.                                    </u>
				Yes	No
1	Accounting method used to prepare the Form 990: 🛛 Cash 🗌 Accrual 🗌 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	🛛 Separate basis 🗌 Consolidated basis 📃 Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Lorm	000 /	2012)

Form 990 (2013)

# SCHEDULE A

### (Form 990 or 990-EZ)

# 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.

**Open to Public** Attach to Form 990 or Form 990-EZ. Department of the Treasury Inspection Internal Revenue Service Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization WEST NASHVILLE SPORTS LEAGUE INC 62-1720706 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) X 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10  $\square$ 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **c** Type III-Functionally integrated **b** Type II **d** Type III-Non-functionally integrated a Type I By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons е other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization. check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (i) Yes No (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h (ii) EIN (iii) Type of organization (iv) Is the organization (i) Name of supported (v) Did you notify (vi) Is the (vii) Amount of monetary organization (described on lines 1-9 in col. (i) listed in your the organization in organization in col. support above or IRC section col. (i) of your (i) organized in the governing document? support? U.S.? (see instructions)) Yes No Yes No Yes No (A) (B) (C) (D) (E)

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.



Total

OMB No. 1545-0047

2013
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Sched			ORTS LEAGUE IN			62-1720706	Page 2		
Pa	rt II Support Schedule for Or	ganizations D	escribed in S	ections 170(b)	(1)(A)(iv) and ^r	170(b)(1)(A)(vi			
	(Complete only if you chec	ked the box or	n line 5, 7, or 8	of Part I or if th	ne organization	failed to qualify	under		
	Part III. If the organization	fails to qualify	under the tests	s listed below, p	please complete	e Part III.)			
Sec	tion A. Public Support								
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")								
2	Tax revenues levied for the								
2	organization's benefit and either paid								
	to or expended on its behalf								
3	The value of services or facilities								
3	furnished by a governmental unit to the								
	organization without charge								
4	Total. Add lines 1 through 3								
5	The portion of total contributions by								
	each person (other than a								
	governmental unit or publicly								
	supported organization) included on								
	line 1 that exceeds 2% of the amount								
	shown on line 11, column (f)								
6	Public support. Subtract line 5 from line 4								
	tion B. Total Support						I		
-	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
7	Amounts from line 4								
8	Gross income from interest, dividends,								
	payments received on securities loans,								
	rents, royalties and income from similar sources								
9	Net income from unrelated business								
	activities, whether or not the business is regularly carried on								
10	Other income. Do not include gain or								
	loss from the sale of capital assets (Explain in Part IV.)								
11	<b>Total support.</b> Add lines 7 through 10								
12	Gross receipts from related activities, etc. (se					12			
	First five years. If the Form 990 is for the	,				LI			
13	organization, check this box and <b>stop here</b>								
Sec	tion C. Computation of Public Su	pport Percen	tage						
14	Public support percentage for 2013 (line 6, co					14	%		
15	Public support percentage from 2012 Schedu						%		
16a	33 1/3% support test - 2013. If the organiz								
	box and <b>stop here.</b> The organization quali						🕨 🗌		
b	33 1/3% support test - 2012. If the organize								
	check this box and <b>stop here.</b> The organiz					••••	🕨 🔲		
17a				-					
	<b>10%-facts-and-circumstances test - 2013.</b> 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 <b>stop here.</b> Explain in								
	Part IV how the organization meets the "facts								
	organization		•	•			▶ □		
b	10%-facts-and-circumstances test - 201						••••		
5	15 is 10% or more, and if the organization	0							
	Explain in Part IV how the organization meets				-				
				•					
18	Private foundation. If the organization did						•••••		
10									
EEA				•••••			••••••••••••••••••••••••••••••••••••••		
						Sonedule A (FOII			

Schee	dule A (Form 990 or 990-EZ) 2013 WEST	NASHVILLE SPOR	TS LEAGUE INC			62-1720706	Page 3
Pa	rt III Support Schedule for Org	janizations Des	scribed in Sec	tion 509(a)(2)			
	(Complete only if you check	ked the box on I	ine 9 of Part I of	or if the organiz	zation failed to	qualify under P	art II.
	If the organization fails to q	ualify under the	tests listed be	low, please co	mplete Part II.)	)	
Sec	ction A. Public Support			<i>,</i> <b>,</b>			
	endar year (or fiscal year beginning in) <b>&gt;</b>	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	······································	(4) 2000	() = 0.10	(0) 2011	(4) 2012	(0) 2010	(1) 1 0101
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	<b>CD C1</b>	170 005	25 150	120 499	72 200	477 510
2	Gross receipts from admissions, merchandise	63,612	172,885	35,158	132,477	73,386	477,518
2	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	974,641	966,434	990,723	1,036,617	1,004,333	4,972,748
3	Gross receipts from activities that are not an						
	unrelated trade or bus. under sec 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						
3	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	1,038,253	1,139,319	1,025,881	1,169,094	1,077,719	5,450,266
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
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	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
0							5,450,266
Sec	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	1,038,253	1,139,319	1,025,881	1,169,094		5,450,266
Ū			1/100/010	1,010,001	1/100/001	270777125	5/150/200
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar sources	2,588	772		226	477	4,063
	royalties and income from similar sources	2,500	//2		220		4,003
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
_	acquired after June 30, 1975						
С	Add lines 10a and 10b	2,588	772		226	477	4,063
11	Net income from unrelated business						
	activities not included in 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 IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	1,040,841	1,140,091	1,025,881	1,169,320	1,078,196	5,454,329
14	First five years. If the Form 990 is for the or						
	organization, check this box and stop here						<u></u> ▶ <u></u>
Sec	ction C. Computation of Public Su	pport Percenta	ige				
15	Public support percentage for 2013 (line 8, colu	umn (f) divided by line	e 13, column (f))			15	99.93 %
16	Public support percentage from 2012 Schedule	e A, Part III, line 15				16	99.92 %
Sec	ction D. Computation of Investmer	nt Income Perc	entage				
17	Investment income percentage for 2013 (line	e 10c, column (f) div	vided by line 13, co	olumn (f))		17	0.07 %
18	Investment income percentage from 2012 S	chedule A, Part III, I	line 17			18	%
19a	33 1/3% support tests - 2013. If the organiz					and line	
	17 is not more than 33 1/3%, check this box						🕨 🛛
h	33 1/3% support tests - 2012. If the organiz	-					
	line 18 is not more than 33 1/3%, check this						🕨 🗖
20	<b>Private foundation.</b> If the organization did r		-				• 🗖

SCI	HEDULE D	Supplemental Financial Statements		OMB No. 1545-0047	
(Form 990)		Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.	2013		
Depar	tment of the Treasury	► Attach to Form 990.		Open to Public	
	al Revenue Service	Information about Schedule D (Form 990) and its instructions is at www.irs.gov/fo	rm990.	Inspection	
	of the organization			yer identification number	
Pa		LE SPORTS LEAGUE INC tions Maintaining Donor Advised Funds or Other Similar Funds or Accounts		-1720706	
га		if the organization answered "Yes" to Form 990, Part IV, line 6.	5.		
	Complete	(a) Donor advised funds	(b) F	Funds and other accounts	
1	Total number at en	d of year	. ,		
2	Aggregate contribut	ions to (during year)			
3	Aggregate grants fr	om (during year)			
4	Aggregate value at	end of year			
5	-	n inform all donors and donor advisors in writing that the assets held in donor advised			
_	-	ization's property, subject to the organization's exclusive legal control?	•••	Yes 📋	No
6	-	inform all grantees, donors, and donor advisors in writing that grant funds can be used			
		urposes and not for the benefit of the donor or donor advisor, or for any other purpose			N
Pa	<u> </u>	sible private benefit?		Yes 🗌	No
ιu		e if the organization answered "Yes" to Form 990, Part IV, line 7.			
1		ervation easements held by the organization (check all that apply).			
•		and for public use (e.g., recreation or education)	nportan	nt land area	
	Protection of na		•		
	Preservation of	open space			
2	Complete lines 2a t	hrough 2d if the organization held a qualified conservation contribution in the form of a conservat	ion		
	easement on the la	st day of the tax year.	H	Held at the End of the Tax Ye	ar
а	Total number of cor		2a		
b	•	cted by conservation easements	2b		
С		ation easements on a certified historic structure included in (a)	2c		
d		ation easements included in (c) acquired after 8/17/06, and not on a			
~		ed in the National Register	2d	ul	
3		ation easements modified, transferred, released, extinguished, or terminated by the organization	auring	the	
4	tax year	here property subject to conservation easement is located			
5		on have a written policy regarding the periodic monitoring, inspection, handling of			
•	-	rcement of the conservation easements it holds?		Yes	No
6		hours devoted to monitoring, inspecting, and enforcing conservation easements during the year			
	•				
7	Amount of expense	s incurred in monitoring, inspecting, and enforcing conservation easements during the year			
	▶ \$				
8		ation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)			
	(i) and section 170(			Yes	No
9		e how the organization reports conservation easements in its revenue and expense statement, a			
		include, if applicable, the text of the footnote to the organization's financial statements that descr	ibes the	9	
Pa		unting for conservation easements. zations Maintaining Collections of Art, Historical Treasures, or Othe	r Sim	ular Assats	
ιu		te if the organization answered "Yes" to Form 990, Part IV, line 8.			
1a		lected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and bala	nce she	et	
	•	al treasures, or other similar assets held for public exhibition, education, or research in furtheran			
		de, in Part XIII, the text of the footnote to its financial statements that describes these items.			
b		lected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance	sheet		
	-	al treasures, or other similar assets held for public exhibition, education, or research in furtheran			
	public service, prov	ide the following amounts relating to these items:			
	(i) Revenues inclu	Ided in Form 990, Part VIII, line 1		. ▶ \$ . ▶ \$	
	• •	d in Form 990, Part X		. • \$	
2	-	eceived or held works of art, historical treasures, or other similar assets for financial gain, provide	e the		
	-	equired to be reported under SFAS 116 (ASC 958) relating to these items:		Ν.	
a		in Form 990, Part VIII, line 1		· · · · · · · · · · · · · · · · · · ·	
b	Assets included in I	Form 990, Part X	• • •	. ▶\$	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

	ule D (Form 990) 2013 WEST NASHVILLE SPORT		· · -		62-172070			age 2
Pai	t III Organizations Maintaining Colle	ctions of Art, Histo	prical Treasures, o	or Othe	er Similar Asse	ts (con	tinuec	J)
3	Using the organization's acquisition, accession, and oth	er records, check any of the	ne following that are a sig	gnificant u	se of its			
	collection items (check all that apply):							
а	Public exhibition	d 🗌 Loan or excha	inge programs					
b	Scholarly research	e 🗌 Other						
с	Preservation for future generations							
4	Provide a description of the organization's collections a	nd explain how they furthe	r the organization's even	nnt nurnos	se in Part			
-	XIII.		The organization of exem	iipt puipot				
5		anationa of art historiaal tr	occures or other similar					
5	During the year, did the organization solicit or receive d						/a.a. [[	1
De	assets to be sold to raise funds rather than to be mainta		zation's collection?	• •		. L I	'es 🗋	No
Pa	<b><u>rt IV</u></b> Escrow and Custodial Arrangeme Complete if the organization answe 990, Part X, line 21.		90, Part IV, line 9,	or repo	orted an amount	on For	m	
1a	Is the organization an agent, trustee, custodian or other	intermediary for contributi	ons or other assets not					
						. 🗆 Y	'es	No
b	If "Yes," explain the arrangement in Part XIII and compl					• 🗆 •		,
N		ete the following table.			Amo	unt		
-	Designing helenes			4.		un		
C	Beginning balance							-
d	0,							
е	Distributions during the year			1e				
f	Ending balance			1f				-
2a	Did the organization include an amount on Form 990, P	art X, line 21?				. 🗌 Y	′es 🗋	No
b	If "Yes," explain the arrangement in Part XIII. Check he	re if the explanation has be	een provided in Part XIII				[	
Pa	rt V Endowment Funds.							
	Complete if the organization answe	red "Yes" to Form 9	90. Part IV. line 10	).				
			ior year (c) Two year		(d) Three years back	(e) Four	years ba	
10	Beginning of year balance			13 Dack	(u) Three years back		years ba	
1a ⊾								
b	Contributions							
С	Net investment earnings, gains, and							
	losses							
d	Grants or scholarships							
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the current year er	d balance (line 1a, colum	n (a)) held as:			I		
	Board designated or guasi-endowment	%						
a	<b>.</b>	/0						
b	Permanent endowment %	o/						
С	Temporarily restricted endowment	%						
	The percentages in lines 2a, 2b, and 2c should equal 1	00%.						
3a	Are there endowment funds not in the possession of the	e organization that are held	d and administered for th	e				
	organization by:						Yes	No
	(i) unrelated organizations					3a(i)	[	
	(ii) related organizations					3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations listed as r	equired on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the organizati	•						
Dai	t VI Land, Buildings, and Equipment.							
r ai			00 Dort IV line 11	. See	Form 000 Dort	V line	10	
	Complete if the organization answe							
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)		Accumulated epreciation	(d) Boo	k value	
1a	Land							
b	Buildings							
С	Leasehold improvements		20,871		2,737		18,1	34
d	Equipment		156,517		124,888		31,6	29
е	Other		-				-	
	I. Add lines 1a through 1e. (Column (d) must equal F	orm 990, Part X. column	(B), line 10(c).)				49,7	63
EEA			,,		I	lule D (For		
					001160			

Schedule D (Form 990) 2013

Р	ิล	a	Р	3

Part VII	Investments - Other Securities Complete if the organization answere	d "Yes" to Form 990, Par	t IV, line 11b. See Form 990,	Part X, line 12.
	<ul> <li>(a) Description of security or category (including name of security)</li> </ul>	(b) Book value	(c) Method of valuation Cost or end-of-year market	
(1) Financial de	erivatives			
(2) Closely-held	d equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related. Complete if the organization answere	d "Yes" to Form 990, Par	t IV, line 11c. See Form 990,	Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b)	must equal Form 990, Part X, col. (B) line 13.)			
Faitix	Complete if the organization answere	d "Yes" to Form 990, Par	t IV, line 11d. See Form 990,	Part X, line 15.
	(a) [	escription		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8) (9)				
	n (b) must equal Form 990, Part X, col. (B) line 1	5)		
Part X	Other Liabilities. Complete if the organization answere		t IV. line 11e or 11f. See Forn	n 990. Part X.
	line 25.			, , ,
1.	(a) Description of liability	(b) Book value		
(1) Federal ir	ncome taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	<u>,</u>			
	must equal Form 990, Part X, col. (B) line 25.)			
-	uncertain tax positions. In Part XIII, provide the text of			
organization's I	iability for uncertain tax positions under FIN 48 (ASC	740). Check here if the text of th	ne footnote has been provided in Part X	

Scheo		2-1720706	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	1,160,976
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines <b>2a</b> through <b>2d</b>	2e	97,121
3	Subtract line <b>2e</b> from line <b>1</b>	3	1,063,855
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,063,855
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	per Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	1,023,841
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	18,602
3	Subtract line <b>2e</b> from line <b>1</b>	3	1,005,239
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines <b>4a</b> and <b>4b</b>	4c	15,943
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,021,182
Pa	rt XIII Supplemental Information		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; Also complete this part to provide any additional information.

# 01. Other revenues not included on Form 990 (Part XI, line 2d)

DECREASE	IN	DEFERRED	REVENUE	78,821	
INCREASE	IN	ACCOUNTS	RECEIVABLE	7,953	
INCREASE	IN	REFUNDS	DEDUCTED FROM REVENUE	2,347	
TOTAL				89,121	

Schedule D (Form 990) 2013 WEST NASHVILLE SPORTS LEAGUE INC	62-1720706	Page 5
Part XIII         Supplemental Information (continued)		
02. Other expenses not included on Form 990 (Part XII,	line 2d)	
DECREASE IN PREPAID PROGRAM SERVICE COST 10,602		
03. Other expenses included on Form 990 (Part XII, line	4b)	
DECREASE IN ACCOUNTS PAYABLE 15,298		
INCREASE IN PREPAID INSURANCE 645		
TOTAL 15,943		

SCHEDULE G	Supplemer	ntal Informati	on Regar	ding Fun	draising or Gam	ing Act	ivities	OMB No. 1545-0047
(Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service		organization ent	tered more the ttach to Form	an \$15,000 o 990 or Form	990, Part IV, lines 17, 18 n Form 990-EZ, line 6a. 990-EZ. its instructions is at w			2013 Open to Public Inspection
Name of the organization			•				Employer id	entification number
WEST NASHVILLE SPOR							62-17	
	-	. Complete if t required to cor	-		swered "Yes" to F	orm 990	), Part IV,	line 17.
			-	•	s. Check all that apply.			
a 🗌 Mail solicitations	0	C C	·	-	of non-government gra			
<b>b</b> Internet and email	solicitations		f 🗌	Solicitation of	of government grants			
c Phone solicitations	6		g 🗌	Special fund	traising events			
d 🗌 In-person solicitati	ons							
2a Did the organization I	nave a written or c	oral agreement wit	h any individu	ual (including	officers, directors, trus	tees	_	_
or key employees list	ed in Form 990, F	Part VII) or entity in	connection v	vith professio	onal fundraising service	s?	ו 🗌	res 🗌 No
<b>b</b> If "Yes," list the ten hi	ghest paid individ	uals or entities (fur	ndraisers) pur	rsuant to agr	eements under which t	he fundrais	ser is to be	
compensated at leas	t \$5,000 by the or	ganization.						
(i) Name and address	of individual			draiser have	(iv) Gross receipts		ount paid to tained by)	(vi) Amount paid to
or entity (fundra	iser)	(ii) Activity		r control of outions?	from activity	fundrai	ser listed in col. (i)	(or retained by) organization
			Yes	No				
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
Total								
3 List all states in which				t contribution	s or has been notified i	t is exemp	t from	
registration or licensing	•	J						

Page 2

14,341

14,341

12,480

▶

►

Schedule G (Form 990 or 990-EZ) 2013 WEST NASHVILLE SPORTS LEAGUE INC 62-1720706 Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through WINE TASTING GOLF TOURNAM NONE col. (c)) (event type) (event type) (total number) Revenue 1 Gross receipts 14,223 12,598 26,821 . . . 2 Less: Contributions 3 Gross income (line 1 minus line 2) . . . . . . . . . . . . . . . 14,223 12,598 26,821 4 Cash prizes 5 Noncash prizes

4,777

9,564

11 Part III

10

6

Direct Expenses

Rent/facility costs

7 Food and beverages

9 Other direct expenses

8 Entertainment

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

Direct expense summary. Add lines 4 through 9 in column (d)

Net income summary. Subtract line 10 from line 3, column (d)

		· · · · · · · · · · · · · · · · · · ·	1			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rey	1	Gross revenue				
ŝ	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
_	5	Other direct expenses				
	6	Volunteer labor	│	│	│	
	7	Direct expense summary. Add lines 2	2 through 5 in column (d)			
	8	Net gaming income summary. Subtra	act line 7 from line 1, column	(d)		
9		ter the state(s) in which the organization				
a b		the organization licensed to operate ga No," explain:	aming activities in each of the			Yes 📋 No
10a b		ere any of the organization's gaming lic Yes," explain:	enses revoked, suspended	or terminated during the tax	year?	Yes 🗌 No

# SCHEDULE L

### (Form 990 or 990-EZ)

# **Transactions With Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, of Form 990-EZ, Part V, line 38a or 40b.

OMB No. 1545-0047 2013

•	t of the Treasury venue Service	Inform	,	ch to Form 990 o chedule L (Form					e instructi s is at www		ov/forn	n <b>990</b> .		Open Inspe	to Pul ction	blic
	e organization	,									er ident		n numb			
WEST N	ASHVILLE SP	ORTS LEA	GUE INC							62-1	72070	6				
Part I	Excess	Benefit T	ransactions	(section (501)	(c)(3) a	and section	on 501(c)	(4) orga	anizations	only).						
	Complet	e if the or	ganization ar	nswered "Yes"	on For	rm 990, l	Part IV, li	ne 25a (	or 25b, or	Form	990-E	Z, Pa	art V, I	line 4	0b.	
1	(a) Name of disqu	alified person		(b) Relationship betw	ween disq	ualified pers	on and		(c) Do	scription	of tranca	ction			(d) Cori	ected?
	(a) Name of disqu	lailleu person		0	rganizatio	n			(0) De	scription	Ji ti alisa	CUON			Yes	No
(1)																
(2)																
(3)																
	ter the amount o	of tax incurr	ed by the organ	ization managers	s or disq	ualified pe	ersons durii	ng the ye	ar							
un	der section 4958	3										▶ \$	5			
<b>3</b> En	ter the amount of	of tax, if any	v, on line 2, abov	ve, reimbursed by	y the org	ganization				•••	•••	▶ \$	5			
Part I	Loans t	o and/or	Erom Intoros	ted Persons.												
Farti				swered "Yes"	on Foi	rm 990-F	7 Part V	/ line 38	Ba or Forr	n 990	Part I	V lin	e 26	or if tl	ne	
				nt on Form 99							i aiti	•,	0 20,	01 11 11	10	
(a) N	ame of interested pe		(b) Relationship	(c) Purpose of	1	oan to or	(e) Ori		(f) Balan	co duo	(a) In (	lefault?	(b) Ar	proved	(i) Wi	itton
(a) N	ane of interested pe		with organization	loan	fro	om the	principal :	-	(I) Dalah	ce uue	(9) 11 0	erauit :	by bo		agree	
					orgai	nization?							comm	nittee?		
					То	From					Yes	No	Yes	No	Yes	No
(1)																
(2)																
(3)																
(4)																
(5)																
(5) Total								. ▶ \$								
Part I								. • •								
i arti				inswered "Yes			Part IV.	line 27.								
(a)	Name of interested		ľ	ip between interested		c) Amount of			) Type of assis	tonoo		10	Durno	se of ass	iotonoo	
(a)	Name of Interested	person	.,	nd the organization	, (c		assistance	(0	) Type of assis	stance		(e	<i>y</i> Fulpo:		SISTURICE	
(1)																
(2)																
											T					
(3)																

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2013

EEA

(4)

(5)

### Part IV **Business Transactions Involving Interested Persons.** Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	<b>(b)</b> Relationship between interested person and the organization	<b>(c)</b> Amount of transaction	(d) Description of transaction	<b>(e)</b> Sha organiz reven	ation's
				Yes	No
(1) SANDI TYGARD	WIFE OF PRESIDENT	30,162	SALARY BOOKKEEPER		x
(2)					
(3)					
(4)					
(5)					
Part V Supplemental Information					

Provide additional information for responses to questions on Schedule L (see instructions).

# Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047
2013
Open to Public

Employer identification number

62-1720706

Internal Revenue Service Name of the organization

Department of the Treasury

### WEST NASHVILLE SPORTS LEAGUE INC

### 01. Form 990 governing body review (Part VI, line 11)

THE TAX RETURN AND AUDITED FINANCIAL STATEMENTS ARE PRESENTED TO THE BOARD OF DIRECTORS

AND MADE PART OF THE MINUTES OF THE MEETINGS. THE FORM 990 IS REVIEWED BY THE BOARD PRIOR

TO FILING.

# 02. CEO, executive director, top management comp (Part VI, line 15a)

THE PROCESS FOR DETERMINING COMPENSATION OF THE ORGANIZATION'S PRESIDENT AND PRINCIPAL

OFFICER INCLUDES A REVIEW BY THE ORGANIZATION'S BOARD OF DIRECTORS AND USES COMPARABILITY

DATA OF LOCAL ORGANIZATIONS OF SIMILAR SIZE AND NATURE OF ACTIVITIES.

### 03. Governing documents, etc, available to public (Part VI, line 19)

THE ORGANIZATION PROVIDES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICIES AND

FINANCIAL STATEMENTS TO THE GENERAL PUBLIC TO THE EXTENT IT IS LEGALLY REQUIRED TO DO SO.

THE FORM 990 AND ALL ATTACHMENTS ARE OF COURSE AVAILABLE TO THE GENERAL PUBLIC, VIA

ELECTRONIC MEANS.

### 04. List of other expenses (Part IX, line 24e)

PROGRAM SERVICE EXPENSE			
ADVERTISING AND PROMOTIONS	6,472		
TROPHIES AND MEDALLIONS	27,347		
DUES FEES SUBSCRIPTION	4,571		
PRINTING AND REPRODUCTION	27,848		
REPAIRS AND MAINTENANCE	27,411		
SUPPLIES	18,169		
CLINICS EXPENSE	3,000		

Schedule O (Form 990 or 990-EZ) (2013)			Page <b>2</b>
Name of the organization		Employer identification number	
WEST NASHVILLE SPORTS LEAGUE INC		 62-1720706	
REGISTRATION MGT AND CREDIT CARD FEES	26,770		
GASOLINE	4,255		
MEETINGS EXPENSE	2,905		
TEAM SPONSORSHIPS	5,323		
MISCELLANEOUS PROGRAM EXPENSES	44	 	
TOTAL	154,115		
MANAGEMENT AND GENERAL			
UTILITIES	15,553		
PRINTING AND REPRODUCTION	9,084		
REPAIRS AND MAINTENANCE	8,108		
SUPPLIES	4,217		
TAXES LICENSES AND PERMITS	2,913		
CHARITABLE CONTRIBUTIONS	2,500	 	
GASOLINE	2,470		
BANK CHARGES	1,333		
BUSINESS GIFTS FLOWERS	1,265		
DUES FEES SUBSCRIPTIONS	1,169		
MEALS AND ENTERTAINMENT	927		
MEETINGS EXPENSE	883		
PARKING AND TRANSPORTATION	515		
MISCELLANEOUS MANAGEMENT EXPENSES	17		
TOTAL	50,954		

Form	8879-EO
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# **IRS e-file Signature Authorization** for an Exempt Organization

For calendar year 2013, or fiscal year beginning

OMB No. 1545-1878

2013

Department of the Treasury
Internal Revenue Service
Name of exempt organization

Do not send to the IRS. Keep for your records.

Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

and ending

Employer identification number

62-1720706

WEST NASHVILLE SPORTS LEAGUE INC

Name and title of officer

#### SCOTT TYGARD, PRESIDENT Dort Type of Return and Return Information (Whole Dollars Only)

ration (whole Dollars Only)	
Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you	
check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then	
leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on	
the applicable line below. Do not complete more than 1 line in Part I.	
1a Form 990 check here 🕨 🗴 b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1,063,855
2a Form 990-EZ check here b b Total revenue, if any (Form 990-EZ, line 9)	
3a Form 1120-POL check here <b>b</b> Total tax (Form 1120-POL, line 22)	
4a Form 990-PF check here <b>b</b> Tax based on investment income (Form 990-PF, Part VI, line 5) 4b	

#### **Declaration and Signature Authorization of Officer** Part II

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2013 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only

2	I authorize	R SCOTT	DIXON	CPA	to enter my PI	N 20706	as my signature
				ERO firm name		Enter five numbers, but do not enter all zeros	
	on the orga	inization's ta	x vear 20	13 electronically filed return	If I have indicated within	this return that a copy of	f the return is

being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2013 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature	Date 06-26-2014	
Part III Certification and Authentication		
ERO's EFIN/PIN. Enter your six-digit electronic filing identification		
number (EFIN) followed by your five-digit self-selected PIN.	629752 81218	
	do not enter all zeros	
I certify that the above numeric entry is my PIN, which is my signature on the 2013 electro indicated above. I confirm that I am submitting this return in accordance with the requ Information for Authorized IRS e-file Providers for Business Returns.		
ERO's signature <b>ROBERT S DIXON</b>	Date > 08-11-2014	

For Paperwork Reduction Act Notice, see instructions.

Form 8879-EO (2013)

EEA

Statement of Program Service Accomplishr	ments 2013 01
Name(s) as shown on return	Your Social Security Number
WEST NASHVILLE SPORTS LEAGUE INC	62-1720706
FORM 990, PART III(A)	
FORM 990, PARI III(A)	
PROGRAM SERVICE CODE	
PROGRAM SERVICE CODE PROGRAM SERVICE EXPENSES	\$82901
GRANTS AND ALLOCATIONS INCLUDED IN ABOVE EXPENSE	
	-
PROGRAM SERVICES REVENUE	\$95491
EXPLANATION	
OTHER PROGRAM SERVICES CONSIST OF NON-SEPARATELY REPORTED PROGRAM SERVICE	ES. THESE ARE
PROGRAMS FOR FALL BASEBALL, SUMMER BASKETBALL AND LACROSSE.	

		<b>2013</b> Page 1
WEST NASHVILLE SPORTS LEAGUE INC	FEIN 6.1	2-1720700
VEST NASHVILLE SPORTS LEAGUE INC	02	<u>2 1/20/00</u>
ALL OTHER CONTRIBUTIONS, GIFTS AND OTHE	R	
Description		Amount
ONTRIBUTIONS UNRESTRICTED	\$	38,22
ONTRIBUTIONS RESTRICTED		8,34
Total:	\$	46,56
OTHER FUNCTIONAL EXPENSES, PROGRAMS		
escription		Amount
DVERTISING AND PROMOTIONS	\$	6,47
ROPHIES AND MEDALLIONS		27,34
UES FEES SUBSCRIPTION		4,57
RINTING AND REPRODUCTION		27,84
EPAIRS AND MAINTENANCE UPPLIES		27,41
LINICS EXPENSE		<u>18,16</u> 3,00
EGISTRATION MANAGEMENT AND CREDIT CARD FEES		26,77
ASOLINE		4,25
IEETINGS EXPENSE		2 90
TEAM SPONSORSHIPS		5,32
MEETINGS EXPENSE TEAM SPONSORSHIPS MISCELLANEOUS PROGRAM EXPENSES Total: OTHER FUNCTIONAL EXPENSES, MANAGEMENT AND GE		2,90 5,32 4 <b>154,11</b>
TEAM SPONSORSHIPS IISCELLANEOUS PROGRAM EXPENSES Total: OTHER FUNCTIONAL EXPENSES, MANAGEMENT AND GE Description TILITIES PRINTING AND REPRODUCTION EPAIRS AND MAINTENANCE SUPPLIES PAXES LICENSES AND PERMITS PARITABLE CONTRIBUTIONS		5,32 4 154,11 15,55 9,08 8,10 4,21 2,91 2,50
TEAM SPONSORSHIPS IISCELLANEOUS PROGRAM EXPENSES Total: OTHER FUNCTIONAL EXPENSES, MANAGEMENT AND GEN DESCRIPTION UTILITIES PRINTING AND REPRODUCTION REPAIRS AND MAINTENANCE SUPPLIES TAXES LICENSES AND PERMITS TAXES TAXES TAXES TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL: TOTAL:		5,32 4 <b>154,11</b> 5,55 9,08 8,10 4,21 2,91 2,50 2,47
TEAM SPONSORSHIPS IISCELLANEOUS PROGRAM EXPENSES Total: OTHER FUNCTIONAL EXPENSES, MANAGEMENT AND GE DESCRIPTION TILITIES PRINTING AND REPRODUCTION REPAIRS AND MAINTENANCE SUPPLIES TAXES LICENSES AND PERMITS TAXES LICENSES TAXES LICENSES		5,32 4 <b>154,11</b> 15,55 9,08 8,10 4,21 2,91 2,50 2,47 1,33
EAM SPONSORSHIPS IISCELLANEOUS PROGRAM EXPENSES Total: OTHER FUNCTIONAL EXPENSES, MANAGEMENT AND GE OESCRIPTION TILITIES PRINTING AND REPRODUCTION EPAIRS AND MAINTENANCE SUPPLIES CAXES LICENSES AND PERMITS CAXES LICENSES AND PERMITS CHARITABLE CONTRIBUTIONS CASOLINE CANC CHARGES BUSINESS GIFTS, FLOWERS		5,32 4 <b>154,11</b> <b>Amount</b> 15,55 9,08 8,10 4,21 2,91 2,50 2,47 1,33 1,26
EAM SPONSORSHIPS IISCELLANEOUS PROGRAM EXPENSES Total: OTHER FUNCTIONAL EXPENSES, MANAGEMENT AND GE OESCRIPTION TILLITIES PRINTING AND REPRODUCTION EPAIRS AND MAINTENANCE SUPPLIES CAXES LICENSES AND PERMITS CHARITABLE CONTRIBUTIONS CASOLINE CANC CHARGES SUSINESS GIFTS, FLOWERS OUES FEES SUBSCRIPTION		5,32 4 <b>154,11</b> <b>Amount</b> 15,55 9,08 8,10 4,21 2,91 2,50 2,47 1,33 1,26 1,16
TEAM SPONSORSHIPS IISCELLANEOUS PROGRAM EXPENSES Total: OTHER FUNCTIONAL EXPENSES, MANAGEMENT AND GE DESCRIPTION PRINTING AND REPRODUCTION REPAIRS AND MAINTENANCE SUPPLIES PAXES LICENSES AND PERMITS PARITABLE CONTRIBUTIONS PASOLINE PARITABLE CONTRIBUTIONS PASOLINE PARITABLE SUBSCRIPTION DUES FEES SUBSCRIPTION DEALS AND ENTERTAINMENT		5,32 4 <b>154,11</b> <b>Amount</b> 15,55 9,08 8,10 4,21 2,91 2,50 2,47 1,33 1,26 1,16 92
TEAM SPONSORSHIPS IISCELLANEOUS PROGRAM EXPENSES Total: OTHER FUNCTIONAL EXPENSES, MANAGEMENT AND GE OESCRIPTION UTILITIES PRINTING AND REPRODUCTION REPAIRS AND MAINTENANCE SUPPLIES TAXES LICENSES AND PERMITS TAXES LICENSES OF TO A COMPANY TAXES SUBSCRIPTION TEALS AND ENTERTAINMENT TEETINGS EXPENSE		5,32 4 <b>154,11</b> 15,55 9,08 8,10 4,21 2,91 2,50 2,47 1,33 1,26 1,16 92 88
TEAM SPONSORSHIPS MISCELLANEOUS PROGRAM EXPENSES Total:		5,32 4 154,11 Amount 15,55 9,08 8,10 4,21 2,91