

REDDY CPA LLC

1255 PEACHTREE PKWY STE 4202 CUMMING, GA 30041 cpa@reddycpa.com Phone: (770)599-5111 | Fax:

December 15, 2023

Atlanta Cricket League Inc 802 Pistace Ct Johns Creek, GA 30022

Subject: Preparation of 2022 Tax Returns

Atlanta Cricket League Inc:

Thank you for choosing REDDY CPA LLC to assist you with your 2022 taxes. This letter confirms the terms of our engagement with you and outlines the nature and extent of our services.

We will prepare your 2022 federal and state income tax returns. We will depend on you to provide the information we need to prepare complete and accurate returns. We may ask you to clarify some items but will not audit or verify the data you submit. An Organizer is enclosed to help you collect the data required for your return. The Organizer will help you avoid overlooking important information. By using it, you will contribute to the efficient Preparation of your returns and help minimize the cost of our services.

We will perform accounting services only as needed to prepare your tax returns. Our work will not include procedures to find defalcations or other irregularities. If you are a US citizen or a US Legal Permanent resident, please note that US Tax law requires you to report all worldwide income in your income tax return. And also, note that Rddy CPA will only utilize its professional competence to assist you in the Preparation of your US Tax return; accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for you to clarify some of the information you submit. We will inform you of any material errors, fraud, or other illegal acts we discover.

Please inform us about the foreign bank accounts you have. If you are interested in a foreign bank account or financial institution, you should inform us so we can report the same as per FBAR filing requirements.

The law imposes penalties when taxpayers underestimate their tax liability. Please call us if you have concerns about such penalties. Should we encounter instances of unclear tax law or potential conflicts in the interpretation of the law, we will outline the appropriate courses of action and the risks and consequences of each. We will ultimately adopt, on your behalf, the alternative you select.

You agree that any dispute that may arise regarding the meaning, performance, or enforcement of this engagement will, before resorting to litigation, be submitted to mediation and that they will engage in the mediation process in good faith once a written request to mediate has been given by any party to the engagement. The results of any such mediation shall be binding only upon the agreement of each party to be bound. The participating parties shall share the costs of any mediation proceeding equally.

Any litigation arising out of this engagement, except actions by us to enforce payment of our professional invoices, must be filed within one year from the completion of the engagement, notwithstanding any statutory provision to the contrary. In the event of litigation brought against us, any judgment you obtain shall be limited in amount and shall not exceed the amount of the Fee charged and paid by you for the services outlined in this engagement letter.

Our Fee will be based on the time required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable upon presentation of the draft tax return. The services are payable once we prepare the Tax return and send it to you by Email or uploading it. Suppose we are not receiving the payment at the time of service or completetion of of filing of Federal Tax return. In that case, we will directly take the amount from your bank account used to pay or refund taxes for federal or state. As a result, you authorize Reddy CPA LLC to collect the Fee from such a bank account.

All the cases that are not resolved through medication will only be litigated in Georgai and Forsyth Country Courts of Georgia shall have sole and exclusive jurisdiction for all disputes on fees or on the Preparation of the tax return that is litigated.

We will return your original records to you at the end of this engagement, and we will not keep copies of your records other than

your tax return with us. You should securely store these records, along with all supporting documents, canceled checks, etc., as these are needed to prove the accuracy and completeness of a return upon inquiry or audit by the IRS. Upon Preparation of the return, we will provide your draft copy. You must go through all the information about the return. If you have any questions on the items of the return, you should contact us and get the explanations, and if you find any discrepancy, you must immediately inform us to rectify the same. Upon your verification, you consent that the return is prepared based on the oral or written documents provided to Reddy CPA. We will retain the copy of the return, your engagement letter, Efile authorization, and other information with us for three years; these documents will be destroyed. For any document which has not been processed and entered by ReddyCPA and IRS imposes any penalty for such missing and amendment of the documents, ReddyCPA's liability to you and any person affected is limited to the Fee we charged and paid by you for the Preparation of such tax return. As a result of this consent, you reviewed the tax return and acknowledged that the return is complete and final. Our engagement to prepare your 2022 tax returns will conclude with the delivery or uploading of tax returns of the completed returns to you (if paper filing) or your signing, and the subsequent submittal, of your tax return (if e-filing). If you have not selected to e-file your returns with our office, you will be solely responsible for filing the returns with the appropriate taxing authorities. Review all tax-return documents carefully before signing them. To affirm that this letter correctly summarizes your understanding of the arrangements for this work, please sign the enclosed copy of this letter in the space indicated and return it to us in the envelope provided. We appreciate your confidence in us. Please call if you have questions. Thank you for the opportunity to be of service. For further assistance with your tax return needs, contact our office at (770)599-5111. Sincerely, Triin Virves McDonald REDDY CPA LLC Accepted By: Officer Date

REDDY CPA LLC

1255 PEACHTREE PKWY STE 4202 CUMMING, GA 30041 cpa@reddycpa.com Phone: (770)599-5111 | Fax:

December 15, 2023

Atlanta Cricket League Inc 802 Pistace Ct Johns Creek, GA 30022

Atlanta Cricket League Inc:

Enclosed is the 2022 federal return for a tax-exempt organization, prepared for Atlanta Cricket League Inc from the information provided. The return will be e-filed with the IRS once we receive a signed Form 8879-TE, IRS e-file Signature Authorization for an Exempt Organization.

The federal return reflects neither a refund nor a balance due.

Thank you for the opportunity to be of service. For further assistance with the organization's tax return needs, contact our office at (770)599-5111.

Sincerely,

Triin Virves McDonald REDDY CPA LLC

REDDY CPA LLC

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December 15, 2023

Atlanta Cricket League Inc 802 Pistace Ct Johns Creek, GA 30022

Your privacy is important to us. Read the following privacy policy.

We collect nonpublic personal information about you from various sources, including:

- * Interviews regarding your tax situation
- * Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data
- * Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions

We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law.

We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information.

If you have any questions about our privacy policy, contact our office at (770)599-5111.

Sincerely,

Triin Virves McDonald REDDY CPA LLC

Acknowledgement and General Information for 2022 **Entities That File Returns Electronically** Name(s) as shown on return Employer Identification Number ATLANTA CRICKET LEAGUE INC **-***5142 Entity address 802 PISTACE CT JOHNS CREEK, GA 30022 Thank you for participating in IRS e-file. 1. X 2022 8868-01 income tax return for Federal was filed electronically. The electronic filing services were provided by REDDY CPA LLC 2. **x** using a Personal Identification Number (PIN) as 8868-01 income tax return was accepted on 05-15-2023 an electronic signature. The entity entered a PIN or authorized the Electronic Return Originator (ERO) to enter or generate a PIN signature. The submission ID assigned to this return is 67389620231353tt3nrs PLEASE DO NOT SEND A PAPER COPY OF ENTITY'S RETURN TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

Form **990**

Department of the Treasury

Internal Revenue Service

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

2022

OMB No. 1545-0047

Open to Public Inspection

For the 2022 calendar year, or tax year beginning 2022, and ending 20 Check if applicable: C Name of organization ATLANTA CRICKET LEAGUE INC D Employer identification number Address change Doing business as 26-1335142 E Telephone number Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite Initial return 802 PISTACE CT (404) 509 - 7472 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code Gross receipts Amended return JOHNS CREEK, GA 30022 357,118 Application pending F Name and address of principal officer: H(a) Is this a group return for subordinates? H(b) Are all subordinates included? **X** 501(c) (**4** 501(c)(3) 4947(a)(1) or 527 If "No," attach a list. See instructions Tax-exempt status: H(c) Group exemption number Website: N/A Form of organization: X Corporation L Year of formation: 2007 M State of legal domicile: GA Part I Summary Briefly describe the organization's mission or most significant activities: ACL WAS FORMED TO PROVIDE A PLATFORM TO CRICKET LOVERS TO HAVE FUN PLAYING , WATCHING , AND BEING APART OF GAME. THE MISSION OF THE Activities & Governance LEAGUE IS TO CONTINUE DOING THIS SUCCESSFULLY IN THE SEASONS TO COME AND PROMOTE THE GREAT GAME OF CRICKET IN AND AROUND METRO ATLANTA Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 0 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 0 6 100 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 . 7b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 8 357,118 0 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 0 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 242,263 357,118 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 **16a** Professional fundraising fees (Part IX, column (A), line 11e) 0 Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 239,004 331,456 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 239,004 331,456 Revenue less expenses. Subtract line 18 from line 12 3,259 25,662 End of Year **Beginning of Current Year** 20 Total assets (Part X, line 16) . . . 43,787 18,125 21 Total liabilities (Part X, line 26) 0 43,787 Net assets or fund balances. Subtract line 21 from line 20 18,125 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge RAMU PARUPALLI Sign Signature of officer Date Here RAMU PARUPALLI, CHAIRMAN Type or print name and title Print/Type preparer's name Preparer's signature Date Paid TRIIN VIRVES MCDONALD TRIIN VIRVES MCDONALD 12-15-2023 self-employed XXXXX2914 **Preparer** Firm's name REDDY CPA LLC Firm's EIN **Use Only** 1255 PEACHTREE PKWY STE 4202 Firm's address Phone no. CUMMING GA 30041 770-599-5111 X No May the IRS discuss this return with the preparer shown above? See instructions Yes

L L	Other program services (Descr	ibe on Schedule O.)			
	(Expenses \$	including grants of \$) (Revenue \$)	

331,456

26-1335142

			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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
_	assessments, or similar amounts as defined in Rev. Proc. 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,	_		.,
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
0	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	-		
9	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		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			- 11
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
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				
	complete Schedule D, Part VI	11a		х
b				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
40	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	40		
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	47		.,
19	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		Х
13	If "Yes," complete Schedule G, Part III	19		
20 a		20a		X X
zu a b		20b		- 21
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX column (Δ) line 12 If "Ves" complete Schedule I. Parts I and II	21		.

Part IV

ATLANTA CRICKET LEAGUE INC 26-1335142 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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		X
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		<u> </u>
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		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
_	transaction 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			
	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 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part.II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	20-		.,
20		28c 29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	29		X
30	conservation contributions? If "Yes," complete Schedule M	20		
24		30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part.I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes,"</i>	31		X
32		32		
22	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		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33		X
J-7	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		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	JJa		
	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	000		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
-	19? Note : All Form 990 filers are required to complete Schedule O	38	x	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u>.</u>	<u>.</u>	
	· · · · · · · · · · · · · · · · · · ·		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		х

Page 5

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			Yes	No
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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		х
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O \dots		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority ov	er,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		Х
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (Fl	BAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		х
b	$ \ \text{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?		5с		
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? $\dots \dots$		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		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	required to file Form 8282?		7с		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? .		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	required?	7g		х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the				
	sponsoring organization have excess business holdings at any time during the year?		8		Х
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		х
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
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	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources				
	against amounts due or received from them.)	11b			
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.	1 1			
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	13b			
С	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or				
	excess parachute payment(s) during the year?		15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? .		16		Х
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any any disqualified or other person engage in any activiti				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	ction A. Governing Body and Management					
		1			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	11	_		
	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 on Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	(4		
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct					
				3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed			4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		Х
6	Did the organization have members or stockholders?			6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?			7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, or persons other than the governing body?			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during					
	the year by the following:					
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
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 on Schedule Q			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	Code.)			1,,	T
					Yes	No
l0a	Did the organization have local chapters, branches, or affiliates?			10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			401		
	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 filin	g the fo	orm?	11a		Х
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			40		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>			12a		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to cor	TIICTS?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			40.		
	describe on Schedule O how this was done			12c		
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?			45-		
a	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization	• • • •		15b		X
16-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			46-		
h	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			46h		
202	organization's exempt status with respect to such arrangements?			16b		Х
3ec 17	List the states with which a copy of this Form 990 is required to be filed Georgia					
17 18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (s	section	501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	JOURDIT	001(0)			
	Own website Another's website Worm under these available. Check all that apply. Other (explain on Sche	dula C))			
10						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of inte	iesi þ0	поу,			
20	and financial statements available to the public during the tax year.	rde				
20	State the name, address, and telephone number of the person who possesses the organization's books and recommendation with the person who possesses the organization's books and recommendation with the person who possesses the organization's books and recommendation with the person who possesses the organization's books and recommendation with the person who possesses the organization's books and recommendation with the person who possesses the organization's books and recommendation with the person who possesses the organization of the person who possesses the organization is books and recommendation with the person who possesses the organization is books and recommendation with the person who possesses the organization is books and recommendation with the person who possesses the organization is books and recommendation with the person who possesses the organization is books and recommendation with the person who possesses the organization is books and recommendation with the person who possesses the organization is books and recommendation with the person who possesses the property of the person who possesses the organization with the person who possesses the organization with the person who possesses the organization with the person who perso	ius.				

EEA

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - · List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See instructions for the order in which to list the persons above.

X Check this box it neither the organization nor any relation	ted organizai	tion co	mpe	nsate	ea a	ny cun	rent	oπicer, airector, or	trustee.	
				((C)					
(A)	(B)				sition			(D)	(E)	(F)
Name and title	Average					nan one s both ar		Reportable	Reportable	Estimated amount
Traine and the	hours					/trustee)		compensation	compensation	of other
	per week						$\overline{}$	from the	from related	compensation
	(list any	9.5	=	g	Z	역 표	Ŧ	organization (W-2/ 1099-MISC/	organizations (W-2/ 1099-MISC/	from the organization and
	hours for	dire	Sile	Officer	ey er	ghe	ormer	1099-NEC)	1099-NEC)	related organizations
	related organizations	ctor	lona		Key employee	st ca	-			
	below	or director	Institutional trustee		yee	mpe				
	dotted line)	6	stee			Highest compensatemployee				
						ted		·		
(1) ANJANEYA SWAMY P BALUSU	$\Delta \Delta$									
CHAIRMAN				Х				0	0	0
(2)	17 - 72									
(3)										
(4)										
(5)										
(6)										
(7)										
YL										
(8)										
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(10)										
(44)										
(11)										
(40)										
(12)										
(13)										
(14)										
	1	i .	1	i I				i .	1	i .

Form **990** (2022)

Form 990 (2022) ATLANTA CRICKET L										-133514		Page 8
Part VII Section A. Officers, Directors, T	rustees,	Key E	Emp	oloy	ee:	s, an	ld F	Highest Comp	ensated I	Employ	ees (continued)
(A) Name and title	(B) Average hours per week	(do not check box, unless p hours officer and a er week			sition nore than one rson is both an irector/trustee)			(D) Reportable compensation from the organization (W-2/	(E) Reportable compensation from related organizations (W-2/	on d	Estimate of comp	(F) ed amount tother ensation m the
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MISC 1099-NEC	Ö/	organiz	ation and organizations
<u>(15)</u>												
<u>(16)</u>												
(17)												
<u>(18)</u>												
<u>(19)</u>												
(20)												
(21)					4							
(22)												
(23) (24)												
(25)			_									
1b Subtotal												
d Total (add lines 1b and 1c)								0		0		0
2 Total number of individuals (including but not limit reportable compensation from the organization	ted to those I	listed a	bove	e) wh	io re	eceive	d mo	ore than \$100,000	of 			0
3 Did the organization list any former officer, direct		-				-						res No
employee on line 1a? <i>If "Yes," complete Schedu</i> 4 For any individual listed on line 1a, is the sum of re	eportable co	mpensa	ation	and	othe	er com	npen	sation from the		• • •	3	X
organization and related organizations greater th											4	x
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes			-			_					5	х
Section B. Independent Contractors 1 Complete this table for your five highest compensa	ited independ	dent co	ntrac	rtore	that	t recei	hav	more than \$100.00)() of			
compensation from the organization. Report comp										year.		
(A) Name and business addres								(B) Description of service			(C)	ion
Total number of independent contractors (including)	g but not lim	nited to	thos	e list	ed a	above)) wh	0				
received more than \$100,000 of compensation fro	m the organi	ization										

Form 990 (2022) ATLANTA CRICKET LEAGUE INC

Part VIII Statement of Revenue

		Check if Schedule O contains a response or r	note to any line in thi	s Part VIII			
			·	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns 1a					
	b	Membership dues 1b					
ants ints	С	Fundraising events 1c					
	d	Related organizations 1d					
iifts ar Al	е	Government grants (contributions) 1e					
S, G	f	All other contributions, gifts, grants,					
tion Sr. Si		and similar amounts not included above 1f	357,118				
흅	g	Noncash contributions included in					
Contributions, Gifts, Grants and Other Similar Amounts		lines 1a-1f <u>1g</u>	\$				
	h	Total. Add lines 1a-1f		357,118			
			Business Code				
ø,		TEAM FEE / KIDS CAMP	711210				
ē <u>Š</u>	b						
ram Ser Revenue	c d						
Rev	e e						
Program Service Revenue		All other program service revenue					
-		Total. Add lines 2a-2f					
		Investment income (including dividends, interest,					
		other similar amounts)					
	4	Income from investment of tax-exempt bond prod	ceeds				
	5	Royalties					
		(i) Real	(ii) Personal				
		Gross rents 6a			Y		
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)	(ii) Other				
	/a	Gross amount from (i) Securities sales of assets	(II) Other				
		other than inventory 7a					
	b	Less: cost or other basis					
e,		and sales expenses 7b					
venue	С	Gain or (loss) 7c					
	d	Net gain or (loss)	,				
Other Re	8a	Gross income from fundraising	1				
ŏ		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18					
	l .	Less: direct expenses					
	l .	Gross income from gaming					
	••	activities, See Part IV, line 19 9	a				
	b	Less: direct expenses 9	ь				
	С	Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less					
		returns and allowances <u>10</u>	а				
		Less: cost of goods sold <u>10</u>	-				
	С	Net income or (loss) from sales of inventory					
	11-		Business Code				
Miscellanous Revenue	11a b						
llan Ænt	C						
Sce		All other revenue					
Ξ		Total . Add lines 11a-11d					
		Total revenue. See instructions		357,118	0	0	0

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must complete all c	columns. All other orga	nizations must comple	te column (A).	
	Check if Schedule O contains a response or note to	any line in this Part IX	1		_
Do n	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
^	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
a b	Management				
C	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g g	Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A) amount, list line 11g expenses on Schedule O.)	331,456	331,456		
12	Advertising and promotion	332,133	001,100		
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а					
b					
C					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	331,456	331,456	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet
Check if Schedule O

		Check if Schedule O contains a response or note to any line in this Part X	/A)	· · · ·	
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	18,125	1	43,787
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) \dots		6	
,,	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a	A		
	b	Less: accumulated depreciation		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	18,125	16	43,787
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	<u> </u>	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
ia		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
	00	of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
		Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.			
es	27	Net assets without donor restrictions	10 105	27	42 707
anc	27 28	Net assets with donor restrictions	18,125	28	43,787
Ba	20	Organizations that do not follow FASB ASC 958, check here		20	
pu		and complete lines 29 through 33.			
Ę	29	Capital stock or trust principal, or current funds		29	
S	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
sse	31	Retained earnings, endowment, accumulated income, or other funds		31	_
Net Assets or Fund Balances	32	Total net assets or fund balances	18,125	32	43,787
ž	33	Total liabilities and net assets/fund balances	18,125	33	43,787
			10,125		Form 000 (2022)

	000	(0000)
⊢orm	990	(2022)

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			357,	118
2	Total expenses (must equal Part IX, column (A), line 25)	2			331,	456
3	Revenue less expenses. Subtract line 2 from line 1	3			25,	662
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			18,	125
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 on Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10			43,	787
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					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 on					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	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	, ,		٠ ٠	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?	• • •	٠ ٠	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on					
_	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					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	• • •	• • -	3a		
b	J					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b -	200	(0000)
EEA				-orm	990 ((2022)

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

ATLANTA CRICKET LEAGUE INC 26-1335142 01. Form 990 governing body review (Part VI, line 11) INCOME AND EXPENSES, BALANCE SHEET AND TAX RETURN IS REVIWED AND APPROVED BY THE BOARD. 02. Form 990 availability to public (Part VI, line 18) THE CORPORATION IS ORGANIZED FOR CHARITABLE, RELIGIOUS AND EDUCATIONAL PURPOSE INCLUDING FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS UNDER 501(C)(3) OF IRC AND TO PROVIDE SUPPORT TO ANY NEEDY FAMILIES, WORK WITH COMMUNITY RAISE FUNDS FOR ORPHAN STUDENT, SUPPORT FOREIGN (INDIA) COUNTERPART, RUN THE SCHOLARSHIP.RAISE MONEY FOR PEOPLE WHO GOT NO SUPPORT, NO FAMILY, FIGHT WITH HUNGER 03. Governing documents, etc, available to public (Part VI, line 19) INCOME AND EXPENSES, BALANCE SHEET AND TAX RETURN IS REVIWED AND APPROVED BY THE BOARD. 04. Explanation of other changes in net assets or fund balances (Part XI, line 9) OPENING BALANE OF BALANCE PRIOR PERIOD ADJUSTMENT \$10102.00 05. List of other fees for services expenses (Part IX, line 11g) OTHER EXPENSES

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an **Exempt Organization Return**

► File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) print ATLANTA CRICKET LEAGUE INC 26-1335142 Number, street, and room or suite no. If a P.O. box, see instructions. File by the due date for 802 PISTACE CT filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions. return. See instructions. JOHNS CREEK GA 30022 Enter the Return Code for the return that this application is for (file a separate application for each return) 0 **Application** Return Application Return Is For Code Is For Code Form 1041-A Form 990 or Form 990-EZ 01 80 Form 4720 (individual) Form 4720 (other than individual) 03 Form 5227 Form 990-PF 04 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) 07

• TI	he books are in the care of ► MAHESH PAWAR, 3515 CANEY CREEK LANE CUMMING GA 30041		
Т	elephone No.▶ 404-509-7472 FAX No.▶		
• If	the organization does not have an office or place of business in the United States, check this box		▶[
• If	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	this is	
	e whole group, check this box ▶ ☐ . If it is for part of the group, check this box ▶ ☐ and attack with the names and TINs of all members the extension is for.	h	
1 2	I request an automatic 6-month extension of time until	tum fo	
3a	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and		,
	estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
С	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by		
	using EFTPS (Electronic Federal Tax Payment System). See instructions.	3с	\$
Caut	ion: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Fo	rm 88	79-TE for payment

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

Form 8868 (Rev. 1-2022)

Form **8879-TE**

IRS *e-file* Signature Authorization for a Tax Exempt Entity

For calendar year 2022, or fiscal year beginning

, 2022, and ending

,20 202

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

on.

intornar i	Go to www.irs.gov/Form88/91E for the late	est information	l.		
Name of	filer		EIN or SSN		
ATLAN	TA CRICKET LEAGUE INC		26-1335142		
Name a	nd title of officer or person subject to tax				
RAMU	PARUPALLI, CHAIRMAN				
Part	Type of Return and Return Information				
Check t	he box for the retum for which you are using this Form 8879-TE and enter the applicab	le amount, if any	, from the retum. F	orm	
	P and Form 5330 filers may enter dollars and cents. For all other forms, enter whole α	, ,			
	5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed				
	5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you ble line below. Do not complete more than one line in Part I.	ou entereu -o- o	n me return, men e	inter -o- on the	
1a	Form 990 check here D b Total revenue, if any (Form 990, Part VIII)	L column (A) lir	ne 12)	1b	
2a	Form 990-EZ check here D b Total revenue, if any (Form 990-EZ, line		•	2b	
3a	Form 1120-POL check here D b Total tax (Form 1120-POL, line 22)	•		3b	
4a	Form 990-PF check here D b Tax based on investment income (Form			4b	
5a	Form 8868 check here X b Balance due (Form 8868, line 3c)			5b	0
6a	Form 990-T check here			6b	
7a	Form 4720 check here			7b	
8a	Form 5227 check here	5227 Item D)		8b	
9a	Form 5330 check here			9b	
10a	Form 8038-CP check here b Amount of credit payment requested (F				
Part				100	
	penalties of perjury, I declare that I am an officer of the above entity or		$\overline{}$	respect to (name	
of entity			-	nined a copy of the	
•	ectronic return and accompanying schedules and statements, and, to the best of my know				
	e. I further declare that the amount in Part I above is the amount shown on the copy of				
	diate service provider, transmitter, or electronic return originator (ERO) to send the re				
	eledgement of receipt or reason for rejection of the transmission, (b) the reason for an e of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial				
	bebit) entry to the financial institution account indicated in the tax preparation software fo				
`	and the financial institution to debit the entry to this account. To revoke a payment, I mus				
	53-4537 no later than 2 business days prior to the payment (settlement) date. I also au				
	sing of the electronic payment of taxes to receive confidential information necessary to a				
	ment. I have selected a personal identification number (PIN) as my signature for the ele nic funds withdrawal.	ectronic return ai	nd, ii applicable, the	consent to	
0.000.0.	io tando mineralia.				
PIN: ch	eck one box only				
_		nter my PIN		as my signature	
ш.	ERO firm name	-	Enter five numbers,	_ , ,	
	Ette inimitante		do not enter all zero		
	n the tax year 2022 electronically filed return. If I have indicated within this return that a				
	gency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the characteristics of the IRS Fed/State program, I also authorize the characteristics of the IRS Fed/State program, I also authorize the characteristics of the IRS Fed/State program, I also authorize the characteristics of the IRS Fed/State program, I also authorize the characteristics of the IRS Fed/State program, I also authorize the characteristics of the IRS Fed/State program, I also authorize the characteristics of the IRS Fed/State program, I also authorize the characteristics of the IRS Fed/State program, I also authorize the characteristics of the IRS Fed/State program, I also authorize the characteristics of the IRS Fed/State program, I also authorize the characteristics of the IRS Fed/State program, I also authorize the characteristics of the IRS Fed/State program and the IRS Fed/State program a	he aforemention	ed ERO to enter m	y PIN on the	
re	etum's disclosure consent screen.				
	s an officer or person subject to tax with respect to the entity, I will enter my PIN as my				
	led return. If I have indicated within this return that a copy of the return is being filed wit		y(ies) regulating ch	arities as part	
0	f the IRS Fed/State program, I will enter my PIN on the retum's disclosure consent scre	een.			
O:	32165		Dete		
	e of officer or person subject to tax		Date <u>12-15-</u>	2023	
Part					
	EFIN/PIN. Enter your six-digit electronic filing identification (EFIN) followed by your five-digit self-selected PIN.				
	67389	06 12345		<u> </u>	
		Do not enter			
	that the above numeric entry is my PIN, which is my signature on the 2022 electronical				
	mitting this return in accordance with the requirements of Pub. 4163 , Modernized e-F rs for Business Returns.	·iie (ivier) Intorn	iation for Authorize	eu IKO <i>0-TII0</i>	
i iovide	TO DUSTROUGH MODULING.				
ERO's si	gnature	Date	12-15-2023		
	ERO Must Retain This Form - See In	structions			

Eorm 8879-TE

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2022, or fiscal year beginning

, 2022, and ending

, 20

OMB No. 1545-0047

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

2022 Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form8879TE for the latest information. Name of filer EIN or SSN ATLANTA CRICKET LEAGUE INC 26-1335142 Name and title of officer or person subject to tax RAMU PARUPALLI, CHAIRMAN Part I Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, 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 one line in Part I. Form 990 check here x **b Total revenue**, if any (Form 990, Part VIII, column (A), line 12)..... **1b** Form 990-EZ check here . . . Form 1120-POL check here. . Form 990-PF check here . . . **b** Tax based on investment income (Form 990-PF, Part V, line 5). 4a Form 8868 check here Form 990-T check here 6a Form 4720 check here 7a Form 5227 check here 8a Form 5330 check here 10a Form 8038-CP check here . . b Amount of credit payment requested (Form 8038-CP, Part III, line 22) . 10b Declaration and Signature Authorization of Officer or Person Subject to Tax I am an officer of the above entity or Under penalties of perjury, I declare that I am a person subject to tax with respect to (name and that I have examined a copy of the of entity) 2022 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 electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the 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 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 electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only I authorize to enter my PIN as my signature **ERO firm name** Enter five numbers, but do not enter all zeros on the tax year 2022 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 also authorize the aforementioned ERO to enter my PIN on the retum's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 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. 32165 Signature of officer or person subject to tax 12-15-2023 **Certification and Authentication** ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 673896 12345 Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I

> **ERO Must Retain This Form - See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So

am submitting this return in accordance with the requirements of Pub. 4163. Modernized e-File (MeF) Information for Authorized IRS e-file

12-15-2023

Date

ERO's signature

Providers for Business Returns.

990	Overflow Statement (This page is not filed with the return. It is for your records only.)	2022 Page 1
Name(s) as shown on return		FEIN
ATLANTA CRIC	CKET LEAGUE INC	26-1335142

Description		Amount	
INSURANCE	\$	11,801	
HARD TENNIS BALLS		1,430	
FIELS RENTALS		226,455	
INAUGURATION EXPENSES		24,823	
TROPHY AND PLAAQUE		22,053	
OTHER EXPENSES		44,894	
Total:	\$	331,456	

