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Form **990-EZ**
Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)
Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.
The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150
2009
Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 01-01-2009, and ending 12-31-2009

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

C Name of organization
Inter-Canyon League
Number and street (or P O box, if mail is not delivered to street address) Room/suite
P O Box 301
City or town, state or country, and ZIP + 4
Silverado, CA 92676

D Employer identification number
95-3787669
E Telephone number
(714) 649-2069
F Group Exemption Number
▶

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).
G Accounting method Cash Accrual
Other (specify) ▶

I Website: ▶ www.intercanyon.org
H Check if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

J Tax-Exempt status (check only one) 501(c)(3) (insert no) 4947(a)(1) or 527
K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally **not** more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 282,177

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

Revenue	
1 Contributions, gifts, grants, and similar amounts received	1 279,059
2 Program service revenue including government fees and contracts	2
3 Membership dues and assessments	3
4 Investment income	4 3,118
5a Gross amount from sale of assets other than inventory	5a
b Less cost or other basis and sales expenses	5b 0
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c
6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>	
a Gross revenue (not including \$ of contributions reported on line 1)	6a 0
b Less direct expenses other than fundraising expenses	6b 0
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c 0
7a Gross sales of inventory, less returns and allowances	7a
b Less cost of goods sold	7b 0
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c
8 Other revenue (describe ▶)	8
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9 282,177
Expenses	
10 Grants and similar amounts paid (attach schedule)	10 72,500
11 Benefits paid to or for members	11
12 Salaries, other compensation, and employee benefits	12
13 Professional fees and other payments to independent contractors	13
14 Occupancy, rent, utilities, and maintenance	14
15 Printing, publications, postage, and shipping	15
16 Other expenses (describe ▶)	16 216,703
17 Total expenses. Add lines 10 through 16	17 289,203
Net Assets	
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 -7,026
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19 274,664
20 Other changes in net assets or fund balances (attach explanation)	20
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21 267,638

Part II Balance Sheets—If total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	260,067	22 256,285
23 Land and buildings		23
24 Other assets (describe ▶)	14,597	24 11,353
25 Total assets	274,664	25 267,638
26 Total liabilities (describe ▶)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	274,664	27 267,638

Part V Other Information (Note the statement requirements in the instructions for Part V.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		No
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		No
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
35a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033 (e) notice, reporting, and proxy tax requirements?		No
35b	If "Yes," has it filed a tax return on Form 990-T for this year?		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	
37b	Did the organization file Form 1120-POL for this year?		No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	No
38b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39	<i>Section 501(c)(7) organizations.</i> Enter		
39a	Initiation fees and capital contributions included on line 9	39a	0
39b	Gross receipts, included on line 9, for public use of club facilities	39b	0
40a	<i>Section 501(c)(3) organizations.</i> Enter amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955		
40b	<i>Section 501(c)(3) and 501(c)(4) organizations.</i> Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b	No
40c	<i>Section 501(c)(3) and 501(c)(4) organizations.</i> Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
40d	<i>Section 501(c)(3) and 501(c)(4) organizations.</i> Enter amount of tax on line 40c reimbursed by the organization		
40e	<i>All organizations.</i> At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	No
41	List the states with which a copy of this return is filed		
42a	The organization's books are in care of Frances Williams Telephone no (714) 649-2069 P O Box 301 Located at Silverado, CA ZIP + 4 926760301		
42b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	42b	No
42c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country	42c	No
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year	43	
44	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of Form 990-EZ.	44	No
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes", Form 990 must be completed instead of Form 990-EZ.	45	No

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.

All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 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		No
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		No
48 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
49a Did the organization make any transfers to an exempt non-charitable related organization?		No
49b If "Yes," was the related organization a section 527 organization?		No

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

50(f) Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

51(d) Total number of other independent contractors each receiving over \$100,000

Please Sign Here

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.

Signature of officer: ***** Date: 2010-05-10

Frances Williams Treasurer
Type or print name and title

Paid Preparer's Use Only

Preparer's signature: J S McBride CPA Date: _____ Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: KEYS & MCBRIDE CPAS
PO BOX 4258
LAGUNA BEACH, CA 926524258

Preparer's identifying number (See instructions): _____
EIN: _____
Phone no: (949) 494-1545

May the IRS discuss this return with the preparer shown above? See instructions Yes No

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2009

Open to Public Inspection

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
Inter-Canyon League

Employer identification number

95-3787669

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

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

- 1 A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
 (ii) a family member of a person described in (i) above?
 (iii) a 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (See instructions) 12

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 14

15 Public Support Percentage for 2008 Schedule A, Part II, line 14 15

16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	42,551	4,128	1,089,666	101,963	279,059	1,517,367
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	15,043	12,617				27,660
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	57,594	16,745	1,089,666	101,963	279,059	1,545,027
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						1,545,027

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	57,594	16,745	1,089,666	101,963	279,059	1,545,027
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			3,629	16,627	3,118	23,374
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b			3,629	16,627	3,118	23,374
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0
13 Total support (Add lines 9, 10c, 11 and 12)						1,568,401
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	98.510 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	99.900 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	1.490 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	0.100 %
19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions <input type="checkbox"/>		

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Additional Data

Software ID:
Software Version:
EIN: 95-3787669
Name: Inter-Canyon League

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Diane Young PO Box 301 Silverado, CA 92676	Member 0	0		
Janet Wilson PO Box 301 Silverado, CA 92676	Member 0	0		
David Valentine PO Box 301 Silverado, CA 92676	Member 0	0		
Roger Rohm PO Box 301 Silverado, CA 92676	Member 0	0		
Janet Rohm PO Box 301 Silverado, CA 92676	Member 0	0		
Connie Nelson PO Box 301 Silverado, CA 92676	Member 0	0		
Judy Myers PO Box 301 Silverado, CA 92676	Member 0	0		
Dennis McHale PO Box 301 Silverado, CA 92676	Member 0	0		
Karl Keranen PO Box 301 Silverado, CA 92676	Member 0	0		
Erik Hov PO Box 301 Silverado, CA 92676	Member 0	0		
Edward Fredette PO Box 301 Silverado, CA 92676	Member 0	0		
Arthur Cummins PO Box 301 Silverado, CA 92676	Member 0	0		
Deanna Craig PO Box 301 Silverado, CA 92676	Member 0	0		
Colleen Colgen PO Box 301 Silverado, CA 92676	Member 0	0		
Kip Craig PO Box 301 Silverado, CA 92676	Member 0	0		
Kim Brown PO Box 301 Silverado, CA 92676	Member 0	0		
Janet Bove PO Box 301 Silverado, CA 92676	Member 0	0		
Laura Bennett PO Box 301 Silverado, CA 92676	Member 0	0		
Scott Breeden PO Box 301 Silverado, CA 92676	Member 0	0		
Alex Bennett PO Box 301 Silverado, CA 92676	Member 0	0		
Rosann Sweeney PO Box 301 Silverado, CA 92676	Member 0	0		
Frankie Sisneroz PO Box 301 Silverado, CA 92676	Member 0	0		
Carl Reinhart PO Box 301 Silverado, CA 92676	Member 0	0		
Chay Peterson PO Box 301 Silverado, CA 92676	Member 0	0		
Brett Peterson PO Box 301 Silverado, CA 92676	Member 0	0		
Nancy Nichols PO Box 301 Silverado, CA 92676	Member 0	0		
Lori Martin PO Box 301 Silverado, CA 92676	Member 0	0		
Derek Martin PO Box 301 Silverado, CA 92676	Member 0	0		
Michael Lejek PO Box 301 Silverado, CA 92676	Member 0	0		
Nick Lax PO Box 301 Silverado, CA 92676	Member 0	0		
Dana Judd PO Box 301 Silverado, CA 92676	Member 0	0		
Joanne Hubble PO Box 301 Silverado, CA 92676	Member 0	0		
Pam Lau PO Box 301 Silverado, CA 92676	Member 0	0		
Mike Colgen PO Box 301 Silverado, CA 92676	Member 0	0		
Leslie Paskus-Amador PO Box 301 Silverado, CA 92676	Member 0	0		
Annie King PO Box 301 Silverado, CA 92676	Member 0	0		
Hank Rodgers PO Box 301 Silverado, CA 92676	Member 0	0		
Mike Boeck PO Box 301 Silverado, CA 92676	Member 0	0		
Mary Robinson PO Box 301 Silverado, CA 92676	Member 0	0		
Gene Robinson PO Box 301 Silverado, CA 92676	Member 0	0		
Bob Click PO Box 301 Silverado, CA 92676	Member 0	0		
Jim Fainer PO Box 437 Silverado, CA 92676	Member 0	0		
Mary Schreiber P O Box 522 Silverado, CA 92676	Secretary 0	0		
Frances Williams P O Box 413 Silverado, CA 92676	Treasurer 0	0		
Robert Hunt 28271 Modjeska Canyon Rd Modjeska, CA 92676	Vice President 0	0		
Dr Deborah Johnson P O Box 867 Silverado, CA 92676	President 0	0		

TY 2009 Grants and Similar Amounts Paid Schedule

Name: Inter-Canyon League

EIN: 95-3787669

Software ID: 09000047

Software Version: 2009v1.3

Item No.	1
Class of Activity	
Donee's Name	Phil & Melody McWilliams
Donee's Address	28012 Modjeska Canyon Rd Modjeska, CA 92676
Amount (FMV)	50,000
Purpose of Payment to Affiliate	
Relationship	Member-property fire loss
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	2
Class of Activity	
Donee's Name	Wiley & Janice Beasley
Donee's Address	17243 Santiago Canyon Rd Silverado, CA 92676
Amount (FMV)	19,000
Purpose of Payment to Affiliate	
Relationship	Member-property fire loss
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	3
Class of Activity	
Donee's Name	Silverado Childrens Center
Donee's Address	7325 Santiago Canyon Rd Silverado, CA 92676
Amount (FMV)	3,500
Purpose of Payment to Affiliate	
Relationship	fbo grantee Jess Morris
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

TY 2009 Other Assets Schedule

Name: Inter-Canyon League

EIN: 95-3787669

Software ID: 09000047

Software Version: 2009v1.3

Description	Beginning of Year Amount	End of Year Amount
Miscellaneous	14,597	11,353

TY 2009 Other Expenses Schedule**Name:** Inter-Canyon League**EIN:** 95-3787669**Software ID:** 09000047**Software Version:** 2009v1.3

Description	Amount
Tree replacement	135,820
Tax filing fees	60
Supplies	146
Postage	832
Orange Cnty Conserv Corp-clean	6,384
Library support	6,785
Legal	1,080
Landscaping-post fire	3,000
Insurance	1,067
Grant coordination	14,670
Donations	1,273
Depreciation	3,244
Common area cleanup--post fire	1,703
Chipper day	7,967
Canyon Watch	1,302
Bookkeeping	320
Bioconsulting	6,060
Bank charges	47
Arborist.	13,850
Advertising	3,593
Accounting & tax preparation	7,500