## **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047 2007

Open to Public Inspection

Department of the Treasury Internal Revenue Service(77) ► The organization may have to use a copy of this return to satisfy state reporting requirements.

A	FOr t	ne 2007 calen	dar year,	or tax year beginning	, 2007,	and endin	<u>g</u>	,		
В	Check	ıf applicable	DI	c			I -	-	cation Number	
	Ac	ddress change	Please use IRS label	[Community Athleti		ouncil	68	-04488	85	
	N:	ame change	or print or type.	1180 Rufus Allen			E Tele	phone numbe	ər	
	In	itial return	See specific	South Lake Tahoe,	CA 90150			0 542-	6081	
	Пте	ermination	Instruc- tions.	1			F Acco	unting od:	X Cash	Accrual
	∏ Ai	mended return						Other (specify	y) <b>&gt;</b>	
	∏ <sub>Aj</sub>	oplication pending	• Section	on 501(c)(3) organizations a	nd 4947(a)(1) nonexempt	H and	I are not applicable to se	ction 527 org	janizations	
	_		charit	table trusts must attach a con 990 or 990-EZ).	ompleted Schedule A	H (a)	Is this a group return fo		Yes	X No
_	18/ - L-	-: N / A	(FOIII	11 330 Of 330-E2).		, , ,	) If 'Yes,' enter number of			
G	web	site: ► N/A		· · · · · · · · · · · · · · · · · · ·	· · ·	— Н (с)	Are all affiliates include		Yes	No
J		nization type	_	· X 501(c) 3 ◀ (unser			(If 'No,' attach a list S		5)	
<u></u>		ck only one)	the ereen	1 34.(0)			<ul> <li>Is this a separate return organization covered by</li> </ul>		ng? Yes	X No
n				nization is not a 509(a)(3) su not more than \$25,000 A re			Group Exemption		<u>→</u>   162	ZY NO
	orga	nization choos	ses to file	a return, be sure to file a co	emplete return.	M	Check ► X if the		n is not require	 ed
1	Gross	receints Add	lines 6h 8	3b, 9b, and 10b to line 12	32,868.	—— '''	to attach Schedule B (			
	irt I			nses, and Changes in		Balances				<u> </u>
	1			ants, and similar amounts re			(000 1110 11101110			
				advised funds	ocived	1 a				
	l .			not included on line 1a).		1 b	3,000.			
	1	•		(not included on line 1a)		1c	3,000.	1		
	l			ons (grants) (not included or	n line 1a)	1 d		1		
	e			3,000. noncasi		\ \		1 e	3	,000.
	2			nue including government fee		/ rt.VII_line :	93)	2		,077.
	3	_		assessments	es and contracts (nom r a	it vii, iiiic	50)	3		<del></del>
	4	•		d temporary cash investmen	its			4	1	,854.
	5		-	from securities				5		70011
	1	Gross rents	u microsi	nom securites		6 a				
		Less rental	evo <b>R</b> EC	CEIVED		6 b		1		
		-		loss) Subtract In 6b from	line 6a			6c		
_		Other invest	ment Jacon	me (describe-			)	7		
E	_	331	AUG	ma (describe	(A) Securities		(B) Other			
Ĕ	8a	Gross ambur than inventor		les of assets other		8a				
Ü	. <sub>.</sub>			Ben sales expenses		8b		1		
		Gain or (loss) (a			· · · · · · · · · · · · · · · · · · ·	8c		1		
200gczm <m< td=""><td></td><td></td><td></td><td>mbine line 8c, columns (A) a</td><td>ind (B)</td><td><del> </del></td><td></td><td>8d</td><td></td><td></td></m<>				mbine line 8c, columns (A) a	ind (B)	<del> </del>		8d		
ଚ	9	-		tivities (attach schedule) If		ıg, check h	ere ►			
₹-	<sup>‡</sup> a	Gross revenu	ue (not ind	cluding \$	of contributions	_				
L		reported on I	ine 1b)	<del>-</del>		9a	2,937.			
C				other than fundraising expension		9b	1,644.			
(	=			rom special events. Subtract			atement 1	9c	1	<u>,293.</u>
ļ	별0a			ry, less returns and allowan	ces	10 a				
	包	Less cost of	-			10b		.		
	€ 0			ales of inventory (attach schedule)	Subtract line 10b from line 10a			10 c		
	NNW ST		-	Part VII, line 103)				11		
	12			es 1e, 2, 3, 4, 5, 6c, 7, 8d, 9	9c, 10c, and 11			12		,224.
	13			m line 44, column (B))				13	<u>56</u>	,817.
X	14	•	-	eral (from line 44, column (C	<del>(</del> ))			14		200.
E N	15	-		44, column (D)).				15		
EXPERSES	16	•		(attach schedule)				16		
<u> </u>	17			ines 16 and 44, column (A)				17		<u>,017.</u>
А	18			the year Subtract line 17 fro				18		<u>,793.</u>
N S E T	19			ances at beginning of year (				19	88	<u>,870.</u>
ŦĘ	20			assets or fund balances (atta				20		
s 	_21			ances at end of year Comb				21		<u>,077.</u>
ВА	A Fo	r Privacy Act	and Pape	rwork Reduction Act Notice	, see the separate instruc	tions.	TEEA0109	L 12/27/07	Form <b>99</b>	<b>0</b> (2007)

Community Athletic Coordinating Council 68-0448885 **Statement of Functional Expenses** All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See instruct) Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I (B) Program (C) Management (A) Total (D) Fundraising services and general 22 a Grants paid from donor advised funds (attach sch) (cash \$ non-cash If this amount includes foreign grants, check here. 22 a 22 b Other grants and allocations (att sch) See Stm 25,000. (cash non-cash If this amount includes 25,000 25,000 22 b foreign grants, check here. Specific assistance to individuals 23 (attach schedule) 24 Benefits paid to or for members 24 (attach schedule) 25 a Compensation of current officers, directors, key employees, etc listed in Part V-A 0 0 0. 0. 25 a **b** Compensation of former officers, directors, key employees, etc listed in Part V-B 0 0 0. 0. 25 b c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 0. 0 0 0 25 c 4958(c)(3)(B) Salaries and wages of employees not included on lines 25a, b, and c 26 27 Pension plan contributions not included on lines 25a, b, and c 27 Employee benefits not included on lines 25a - 27 28 28 29 29 Payroll taxes 30 Professional fundraising fees 30 200 200 31 31 Accounting fees 32 Legal fees 32 33 Supplies 33 34 Telephone 34 35 Postage and shipping 35 36 36 Occupancy 37 Equipment rental and maintenance 37 38 Printing and publications. 38 39 39 40 40 Conferences, conventions, and meetings 41 41 Interest 42 42 Depreciation, depletion, etc (attach schedule).

45 Other expenses not covered above (nemize).		1			
a Athletic Field Improveme	43 a	31,440.	31,440.		
b Nat'l Assoc costs	43 b	377.	377.		
c	43 c				
d	43 d				
e	43 e				
1	43 f				<del></del>
g	43 g				
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	57,017.	56,817.	200.	0
Joint Costs. Check If you are following	SOP	98-2			<del></del>
Are any joint costs from a combined education If 'Yes,' enter (i) the aggregate amount of these \$, (iii) the amount all to Fundraising \$	e joint	, ,	, (ii) the a	mount allocated to Prog	Yes X No gram services e amount allocated
ВАА		TEEA0102L 0	08/02/07		Form <b>990</b> (200)

Form <b>990</b> (2007)	Community	Athletic	Coordinating	Council

68-0448885

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

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

What is the organization's prim All organizations must describi clients served, publications issue zations and 4947(a)(1) nonexe		See Statement 3 levements in a clear and concise manner that are not measurable. (Section 501(c)(3) also enter the amount of grants and alloc	State the number of and (4) organications to others )	Program Service Expenses  (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
a Athletic field	improvements			
(Grants and allocations		) If this amount includes foreign grants,	check here	56,817.
b				
(Grants and allocations		) If this amount includes foreign grants,	chack hare	
c		) It tills amount includes foreign grants,		
(Grants and allocations d		) If this amount includes foreign grants,	check here	
(Grants and allocations	\$	) If this amount includes foreign grants,	check here ►	
e Other program services			_	
(Grants and allocations	\$	) If this amount includes foreign grants,	check here	
f Total of Program Service	e Expenses (should equal lii	ne 44, column (B), Program services)	)	<u>56,</u> 817.

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Form **990** (2007)

Balance Sheets (See the instructions.) (A) **(B)** End of year Where required, attached schedules and amounts within the description Beginning of year column should be for end-of-year amounts only 63,077. 'Cash - non-interest-bearing 88,870 45 46 Savings and temporary cash investments 47 a 47 a Accounts receivable **b** Less: allowance for doubtful accounts 47 b 47 c 48 a Pledges receivable 48 a 48 b b Less allowance for doubtful accounts 48 c 49 49 Grants receivable 50 a Receivables from current and former officers, directors, trustees, and key employees (attach schedule) 50 a **b** Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule) 50 b 51 a Other notes and loans receivable (attach schedule) 51 a 51 b **b** Less: allowance for doubtful accounts 51 c 52 Inventories for sale or use 52 53 Prepaid expenses and deferred charges 53 54a Investments - publicly-traded securities FMV 54 a Cost Cost **FMV b** Investments - other securities (attach sch) 54 b 55 a Investments - land, buildings, & equipment basis 55 a b Less accumulated depreciation (attach schedule) 55 b 55 c 56 56 Investments – other (attach schedule) 57a Land, buildings, and equipment basis 57 a **b** Less accumulated depreciation 57b 57 c (attach schedule) Other assets, including program-related investments 58 88,870 63,077 59 59 Total assets (must equal line 74) Add lines 45 through 58 60 60 Accounts payable and accrued expenses Grants payable 61 61 62 Deferred revenue 62 LIABILITIES Loans from officers, directors, trustees, and key employees (attach schedule) 63 64 a 64a Tax-exempt bond liabilities (attach schedule) **b** Mortgages and other notes payable (attach schedule) 64 b 65 Other liabilities (describe ▶ 65 Total liabilities. Add lines 60 through 65 0. 66 0. X and complete lines 67 Organizations that follow SFAS 117, check here NET. through 69 and lines 73 and 74 67 Unrestricted 87,519 67 61,726. 68 Temporarily restricted 1,351 69 1,351. Permanently restricted Organizations that do not follow SFAS 117, check here and complete lines P 70 through 74 FUZD 70 Capital stock, trust principal, or current funds 71 Paid-in or capital surplus, or land, building, and equipment fund 71 BALANCES Retained earnings, endowment, accumulated income, or other funds 72 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 88,870. 72 (Column (A) must equal line 19 and column (B) must equal line 21) 73 63,077. 88,870. 63,077. Total liabilities and net assets/fund balances. Add lines 66 and 73 74

Form <b>990</b> (20	07) Comm	unity Ath	nletic Co	pordinating	Counci 1
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		ic Coordinating Co					18885 Page <b>5</b>
P	art IV-A Reconciliation of Revenu	e per Audited Financia	l Statement	ts with	Revenue per Re	tur	<b>n</b> (See the
	เครtructions.)	· · · · · · · · · · · · · · · · · · ·	<del></del>				
	<b>-</b> 13						
а	Total revenue, gains, and other support		ents			a	31,224.
b	Amounts included on line a but not on F	Part I, line 12	1				
	1 Net unrealized gains on investments			b1			
	2Donated services and use of facilities			b2			
	3Recoveries of prior year grants			b3			
	4Other (specify)						
				b4	····	]	
	Add lines <b>b1</b> through <b>b4</b>					ь	<del>-, ,</del>
C	Subtract line <b>b</b> from line <b>a</b>					C	31,224.
d	Amounts included on Part I, line 12, but	t not on line <b>a:</b>	,				
	1 Investment expenses not included on Pa	art I, line 6b		d1			
	2Other (specify)					١,	
				d2			
	Add lines <b>d1</b> and <b>d2</b>					d	
<u>e</u>	Total revenue (Part I, line 12) Add lines				<b>&gt;</b>	е	31,224.
P	art IV-B   Reconciliation of Expens	es per Audited Financi	al Statemer	nts with	Expenses per l	Ret	urn
а	Total expenses and losses per audited f	financial statements				а	57,017.
b	Amounts included on line a but not on F	Part I, line 17 <sup>.</sup>					
	1 Donated services and use of facilities			b1			
	2Prior year adjustments reported on Part	1, line 20		b2			
	3Losses reported on Part I, line 20			b3		]	
	4Other (specify)					1	
				b4			
	Add lines <b>b1</b> through <b>b4</b>					ь	
С	Subtract line b from line a					С	57,017.
d	Amounts included on Part I, line 17, but	not on line a:					
	1 Investment expenses not included on Pa			d1			
	2Other (specify)	· <del></del>				1	
		· <del></del>		d2			
	Add lines d1 and d2					d	
е	Total expenses (Part I, line 17) Add lin	es <b>c</b> and <b>d</b>			<b>•</b>	е	57,017.
P	art V-A Current Officers, Director	rs. Trustees, and Kev E	mplovees	(List each	n person who was a	n of	ficer, director, trustee
	or key employee at any time du	iring the year even if they wei	re not comper	sated) (	See the instructions	;)	,,,
		(B) Title and average hours	(C) Compe	nsation	(D) Contributions		(E) Expense
	(A) Name and address	per week devoted to position	(if not p enter -		employee benef		account and other allowances
		to position	Cinci -	~ <del>'</del>	compensation pla		anowances
W	illiam G. Ross	V.P. / Treas		0.		0.	, 0.
	180 Rufus Allen Blvd	5.00					,
	Lake Tahoe, CA 96150						
-	Va	D			<del>                                     </del>	$\overline{}$	

(A) Name and address	per week devoted to position	(if not paid, enter -0-)	employee benefit plans and deferred compensation plans	account and other allowances
William G. Ross	V.P. / Treas	0.	0.	, 0.
1180 Rufus Allen Blvd	5.00			
So Lake Tahoe, CA 96150				
Steve Morales	President	0.	0.	0.
1021 Al Tahoe Blvd	5.00			
South Lake Tahoe, CA 96150				

Form 990 (2007) Community Athletic Coc Part V-A Current Officers, Directors, Tru			68-04488	85		age 6
75 a Enter the total number of officers, directors, and trustees p					Yes	No
<b>b</b> Are any officers, directors, trustees, or key emulisted in Schedule A, Part I, or highest compet A, Part II-A or II-B, related to each other through	nployees listed in Form nsated professional and igh family or business	990, Part V-A, or highed other independent co	est compensated employentractors listed in Schedul	ees le		
identifies the individuals and explains the relationship(s)  c Do any officers, directors, trustees, or key employees listed in form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of 'related organization'						X
to the organization? See the instructions for the definition of 'related organization'  If 'Yes,' attach a statement that includes the information described in the instructions						
d Does the organization have a written conflict of	of interest policy?			75 d		Х
Part V-B Former Officers, Directors, Tru Benefits (If any former officer, direct during the year, list that person below a the instructions)	or, trustee, or key emp	lovee received compen	sation or other benefits (c	tescribed	below	r) e
(A) Name and address	<b>(B)</b> Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Ex account a allow		ther
None						
Part VI Other Information (See the Inst.	ructions.)				Yes	No
76 Did the organization make a change in its acti	vities or methods of co	inducting activities?		76		.  -
If 'Yes,' attach a detailed statement of each cl 77 Were any changes made in the organizing or of	•	out not reported to the I	RS?	76 77		X
If 'Yes,' attach a conformed copy of the change	-	rat not reported to the r	110	''		<u> </u>
78a Did the organization have unrelated business		or more during the year	ar covered by this return?	78a		_X_
b If 'Yes,' has it filed a tax return on Form 990-1	for this year?			78 b	N/	/A
79 Was there a liquidation, dissolution, termination year? If 'Yes,' attach a statement	on, or substantial contra	action during the		79		Х
80 a Is the organization related (other than by assomembership, governing bodies, trustees, office	ociation with a statewid- ers, etc, to any other e	e or nationwide organiz xempt or nonexempt or	ation) through common ganization?	80 a		X
<b>b</b> If 'Yes,' enter the name of the organization ▶			·	[		
		<u> </u>	xempt or nonexem	' <u> </u>		
81 a Enter direct and indirect political expenditures		ons )	81 a	<u>0.</u>   "[	-	v
<b>b</b> Did the organization file Form 1120-POL for the	ns year '			<u> </u> 81 b		X

TEEA0106L 12/27/07

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Form **990** (2007)

Form 990 (2007) Community Athletic Coordinating Council 68-0	448885	F	Page <b>7</b>
Part VI Other Information (continued)		Yes	No
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82 a		x
b If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.).	N/A		
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	_X_	
<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	_83b	_X	
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84 a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts v not tax deductible?	vere 84 b		/A
85 a 501(c)(4), (5), or (6) Were substantially all dues nondeductible by members?	85 a		/A
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85 b	N	/A
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization receivance for proxy tax owed for the prior year	ved a		
c Dues, assessments, and similar amounts from members	N/A		
d Section 162(e) lobbying and political expenditures	N/A		
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices  85e	N/A		
f Taxable amount of lobbying and political expenditures (line 85d less 85e)  85f	N/A		
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85 g	N.	/ <u>A</u>
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85 h	N,	/A
86 501(c)(7) organizations Enter: a Initiation fees and capital contributions included on			
line 12 86a	N/A		
b Gross receipts, included on line 12, for public use of club facilities  86b	N/A		
87 501(c)(12) organizations Enter a Gross income from members or shareholders 87a	N/A		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )  87b	N/A		
88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partner or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701 if 'Yes,' complete Part IX	ership, 3? <b>88 a</b>		X
<b>b</b> At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning section 512(b)(13)? If 'Yes,' complete Part XI	of ► 88 b		X
89 a 501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under			
section 4911 ►	0.		
b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a state explaining each transaction	ment 89b		X
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶	0.		
d Enter Amount of tax on line 89c, above, reimbursed by the organization	0.		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction	tion? 89e		X
f All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89 f		Х
g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during	ng		
the year?  90 a List the states with which a copy of this return is filed ► None	89 g	L	I_X
30 a List the states with which a copy of this return is filled > Notice			
<b>b</b> Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	90 Ь		0
91 a The books are in care of ► Greg Ross Telephone number ► 530 54	12-6059		
Located at ► 1180 Rufus Allen Blvd South Lake Tahoe CA ZIP + 4 ►	96150		
<b>b</b> At any time during the calendar year, did the organization have an interest in or a signature or other authority over	era —	Yes	
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	91 b		X
See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank and Financial Accounts			
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Part VI Other Information (continue	ed)					Y	es No
${f c}$ At any time during the calendar year, did		tion mainta	in an office	outside of the U	Inited States?	91 c	X
If 'Yes,' enter the name of the foreign count							
92 Section 4947(a)(1) nonexempt charitable						N/A	▶ 📗
and enter the amount of tax-exempt inte					▶ 92		N/A
Part VII Analysis of Income-Produc				1			
	Unrelated	business i	ncome	Excluded by se	ction 512, 513, or 514	(E)	
Note: Enter gross amounts unless otherwise indicated	(A) Business code	<b>(E</b> Amo		(C) Exclusion code	<b>(D)</b> Amount	Related or e function in	
93 Program service revenue a Field use fees						25	5,077.
b							
с							
d							
e							
f Medicare/Medicaid payments							
g Fees & contracts from government agencies							
94 Membership dues and assessments						<del>_</del>	
95 Interest on savings & temporary cash invmnts				3	1,854.		
96 Dividends & interest from securities							
97 Net rental income or (loss) from real estate:							
a debt-financed property						<u></u>	
<b>b</b> not debt-financed property							<del></del>
98 Net rental income or (loss) from pers prop							
99 Other investment income							
100 Gain or (loss) from sales of assets other than inventory							
101 Net income or (loss) from special events				1	1,293.		
102 Gross profit or (loss) from sales of inventory					· · · · · · · · · · · · · · · · · · ·	<del></del>	
103 Other revenue a							
b							
c							
d							
e							
104 Subtotal (add columns (B), (D), and (E))					3,147.		<u>5,077.</u>
<b>105 Total</b> (add line 104, columns (B), (D),					<b>-</b> _	28	3,224.
Note: Line 105 plus line 1e, Part I, should equ							
Part VIII Relationship of Activities to	o the Accor	nplishme	nt of Exe	empt Purpose	es (See the instruc	tions.)	
Explain how each activity for whice of the organization's exempt purpose.	h income is re oses (other th	ported in co an by provid	olumn (E) d ding funds	of Part VII contri for such purpose	buted importantly to the es).	e accomplishn	nent
93a Fees charged to local	youth an	d adult	sports	organizat	ions for use o	f athleti	.C
fields							
Part IX Information Regarding Tax	<u>able Subsi</u>	<u>diaries ar</u>	d Disreg	<u>  arded Entitie</u>	<b>s</b> (See the instruct	ions.)	
(A)	(B)		(C	;)	(D)	(E)	
Name, address, and EIN of corporation,	Percentage		Nature of	activities	Total	End-of-y	
partnership, or disregarded entity	ownership int			<del>.</del>	ıncome	asset	<u> </u>
N/A		%				<del></del>	
		%					
	<del></del>	90					
Part X Information Regarding Tra	nefere Acc		ith Parce	nal Renefit (	ontracte (Soc the	inctruction-	<del></del>
a Did the organization, during the year, receive any fu							
<b>b</b> Did the organization, during the year, pa	y premiums, o	lirectly or in	directly, or	•			X No
Note: If 'Yes' to (b), file Form 8870 and Fo	orm 4720 (see	instructions	5)				(2007)
BAA					TEEA0108L 12/27/0	v rorm 99	<b>20</b> (2007)

Form 990 (2007) Community Athletic Coordinating Council

68-0448885 Page **8** 

Par	t XI	Information Regarding Transfers To an organization is a controlling organization	d From Controlled	<b>Entities</b> . Comp	plete only if th	ne			
		organization is a controlling organization	ii as deimed iii see	11011 312(5)(10)	,		Yes	No	
106	Did	the reporting organization make any transfers to a	a controlled entity as de	fined in section 51	2(b)(13) of the C	ode? If			
	'Yes	; complete the schedule below for each controlled	dentity	<del> </del>		<del></del>	Щ	<u> </u>	
_		(A) Name, address, of each controlled entity	(B) Employer Identification Number	on Descr tra	(C) iption of insfer	Amount	(D) of tran	sfer	
а									
b									
С									
		Totals							
			<del></del>	<u>.</u> , L		- J	Yes	No	
107	Did 'Yes	the reporting organization <b>receive</b> any transfers <b>fr</b>	r <b>om</b> a controlled entity a	as defined in section	on 512(b)(13) of t	the Code? I	f	х	
		(A) Name, address, of each controlled entity	(B) Employer Identification Number	on Descr tra	(C) ription of ansfer	Amount	(D) of tran	ısfer	
а									
b									
С									
		Totals							
108	Did ann	the organization have a binding written contract in uities described in question 107 above?	n effect on August 17, 2	006, covering the i	nterest, rents, ro	yalties, and	Yes	No X	
		Under penalties of perjury, I declare that I have examined this reti- true, correct, and complete Declaration of preparer (other than of	urn, including accompanying sch licer) is based on all information	nedules and statements, n of which preparer has a	and to the best of my land knowledge	knowledge and	belief, it i	s	
Plea		D Willem & los	2-		® 8-13	-08			
Sign Here		Signature of officer  Greg Ross, V.P. / Treas			Date				
		Type or print name and title			T	Propagar's SSA	I or DTIN	/Saa	
Paid Pre-		Preparer's Signature > Lamelle, On	lino	Date		Preparer's SSN General Instruc N/A	tion X)	,588	
pare		yours if self-	PA's		AT /2				
Use employed). ► 1158 Emerald Bay Rd EIN ► N/A							30) 541-1910		
BAA					· · · · ·		n <b>990</b>		

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

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

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

Supplementary Information — (See separate instructions.)

2007

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ. Employer identification number Name of the organization 68-0448885 Community Athletic Coordinating Council Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See instructions. List each one. If there are none, enter 'None.') (a) Name and address of each (e) Expense (b) Title and average (c) Compensation (d) Contributions to employee benefit plans and deferred hours per week devoted to position account and other employee paid more than \$50,000 allowances compensation None Total number of other employees paid over \$50,000 Compensation of the Five Highest Paid Independent Contractors for Professional Services Part II - A (See instructions. List each one (whether individuals or firms). If there are none, enter 'None.') (b) Type of service (c) Compensation (a) Name and address of each independent contractor paid more than \$50,000 Total number of others receiving over \$50,000 for professional services Part II - B Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter 'None.' See instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation None Total number of other contractors receiving over \$50,000 for other services

Schedule A (Fo	orm 990 or 990-EZ) 20 <u>07</u>	Community	Athletic	Coordinati	ng Council	68-044888	5	P	age <b>2</b>
Part III	Statements About Acti	vities (See ins	structions.)					Yes	No
to influen or incurre	e year, has the organization ce public opinion on a legis d in connection with the lob ual amounts on line 38, Part	ative matter or re bying activities	ferendum? If	l, state, or local le 'Yes,' enter the to N/A	egislation, including tal expenses paid	g any attempt	1		X
Organizat organizat lobbying :	tions that made an election lons checking 'Yes' must co activities	under section 501 mplete Part VI-B	(h) by filing F AND attach a	orm 5768 must co statement giving	mplete Part VI-A a detailed descript	Other tion of the			
substantii taxable o	e year, has the organization al contributors, trustees, dire rganization with which any s ry? (If the answer to any qu	ectors, officers, cr such person is aff	eators, key er hated as an o	nployees, or mem fficer, director, tru	bers of their familiate, majority own	ies, or with any ner, or principal			
<b>a</b> Sale, exc	hange, or leasing of propert	y <sup>?</sup>					2a		X
<b>b</b> Lending o	of money or other extension	of credit?					2b		Х
<b>c</b> Furnishin	g of goods, services, or faci	lities?					_2c		X
<b>d</b> Payment	of compensation (or payme	nt or reimbursem	ent of expense	es if more than \$1	?(000, ا		2d		Х
<b>e</b> Transfer	of any part of its income or	assets?					2 e		<u>X</u>
<b>3a</b> Did the o explanati	rganization make grants for on of how the organization (	scholarships, fello determines that re	owships, stude cipients quali	ent loans, etc? (If fy to receive paym	'Yes,' attach an nents)		3a		X
<b>b</b> Did the o	rganization have a section 4	-03(b) annuity pla	n for its emplo	oyees?			3b		X
to preser	rganization receive or hold a ve open space, the environr ach a detailed statement	an easement for c nent, historic land	onservation p l areas or hist	urposes, including oric structures? If	g easements		3с		х
<b>d</b> Did the o	rganization provide credit co	ounseling, debt m	anagement, ci	redit repair, or det	ot negotiation serv	ices?	3d		Х
<b>4a</b> Did the o 4f and 4g	rganization maintain any do	nor advised funds	7 If 'Yes,' con	nplete lines 4b thr	rough 4g If 'No,' co	omplete lines	4a		X
<b>b</b> Did the o	rganization make any taxab	le distributions un	der section 49	966? .			4b	N,	/A
<b>c</b> Did the o	rganızatıon make a dıstrıbut	ion to a donor, do	nor advisor, c	or related person?			4c	N,	/A
<b>d</b> Enter the	total number of donor advi-	sed funds owned	at the end of t	he tax year		<b>-</b>			N/A
e Enter the	aggregate value of assets i	neld in all donor a	dvised funds	owned at the end	of the tax year	▶		<del></del>	N/A
funds inc	total number of separate fulluded on line 4d) where don in such funds or accounts	inds or accounts of fors have the right	owned at the e to provide ac	end of the tax yea lvice on the distrib	r (excluding donor oution or investme	advised nt of			0
<b>g</b> Enter the	aggregate value of assets	neld in all funds o	r accounts inc	luded on line 4f a	It the end of the ta	x year ►			0.

An organization organized and operated to test for public safety. Section 509(a)(4) (See instructions)

**Total** 

14

BAA Schedule A (Form 990 or 990-EZ) 2007

0.

	t IV-A Support Schedule (						unting.
	: You may use the worksheet in the			ual to the cash metho	od of accountin	g	<del></del>
begi	ndar year (or fiscal year nning in)	(a) 2006	<b>(b)</b> 2005	<b>(c)</b> 2004	( <b>d)</b> 2003		<b>(e)</b> Total
15	Gifts, grants, and contributions received (Do not include unusual grants See line 28)	2,985.	20,380.	37,678.	19,2	231.	_80,274.
16	Membership fees received						0.
-	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose	17,106.	2				17,106.
18	Gross income from interest, dividends, amts rec'd from payments on securities loans (sec 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less sec 511 taxes) from businesses acquired by the organization after June 30, 1975	1,144.	738.	528.	ļ	519.	2,929.
19	Net income from unrelated business activities not included in line 18						0.
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
21	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge						0.
22	Other income. Attach a schedule Do not include gain or (loss) from sale of capital assets.						0.
23	Total of lines 15 through 22	21,235.	21,118.	38,206.	19,	750.	100,309.
24	Line 23 minus line 17	4,129.	21,118.	38,206.	19,	750.	83,203.
25	Enter 1% of line 23	212.	211.	382.		198.	
26	Organizations described on line	s 10 or 11: a Ente	er 2% of amount in co	olumn (e), line 24	N/A ►	26 a	
t	<ul> <li>Prepare a list for your records to show the supported organization) whose total gifts in return. Enter the total of all these excess</li> </ul>	or 2003 through 2006 excee	ibuted by each person (othe ded the amount shown in li	er than a governmental unit ne 26a Do not file this lis	t or publicly t with your	26 b	-
(	: Total support for section 509(a)(	) test Enter line 24,	column (e)		•	26 c	
•	Add Amounts from column (e) for			19			
		22		26 b	<del></del>	26 d	· · · · · · · · · · · · · · · · · · ·
	Public support (line 26c minus lir	•				200	
	Public support percentage (line		led by line 26c (deno	minator))		26 f	%
	Organizations described on line For amounts included in lines 15 name of, and total amounts rece such amounts for each year	, 16, and 17 that were wed in each year fron	n, each 'disqualified p	erson ' Do not file th	is list with you	r retur	n. Enter the sum of
	(2006) 0 .	(2005)	0. (2004)	0	_ (2003)		0.
	bFor any amount included in line to show the name of, and amour \$5,000 (Include in the list organi After computing the difference be differences (the excess amounts)	t received for each ye zations described in letween the amount re to for each year	ear, that was more the ines 5 through 11b, a ceived and the larger	an the <b>larger</b> of <b>(1)</b> this well as individuals in amount described in	ne amount on li ) Do not file thi (1) or (2), ente	ne 25 i <b>s list</b> ser the s	for the year or (2) with your return. sum of these
	(2006)	(2005)	0. (2004)_	0	(2003)		0.
C	(2006) 0 .  Add Amounts from column (e) for 17  I Add. Line 27a total	or lines 15	80,274.	16 21	<del></del>	27c	97,380.
•	I Add. Line 27a total	0. an	d line 27b total	<del></del>	0.	27 d	0.
•	Public support (line 27c total min	us line 27d total)		-	<u> </u>	27 e	97,380.
	Total support for section 509(a)(2		from line 23, column	(e) ► 27f	100,309.		2.,000
	Public support percentage (line					27 g	97.08 %
	Investment income percentage (		=			27 <sub>h</sub>	

	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/A		
			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs,			,
	and scholarships?	30		<del></del>
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?  If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement)	31	-	-
32	Does the organization maintain the following	_		_
	a Records indicating the racial composition of the student body, faculty, and administrative staff?	32 a		
ı	Records documenting that scholarships and other financial assistance are awarded on a racially			
	nondiscriminatory basis?	32 b	L	
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing		}	
	with student admissions, programs, and scholarships?	32 c		
'	d Copies of all material used by the organization or on its behalf to solicit contributions?	320		_
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to			
•	a Students' rights or privileges?	33 a	<u> </u>	
	Admissions policies?	33 b	<del> </del>	
	Employment of faculty or administrative staff?	33 c		
`	Employment of faculty of autilinistrative stan-	330	ļ	
	Scholarships or other financial assistance?	33 d		
	·			
	Educational policies?	33 e		
1	Use of facilities?	33 f		
	n Abblaha ayaayawa?			
Ġ	g Athletic programs?	33 g		
ı	Other extracurricular activities?	33 h		
	If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement)			
				·
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34 a		
_				
ı	has the organization's right to such aid ever been revoked or suspended?	34 b		<u>_</u>
	If you answered 'Yes' to either 34a or b, please explain using an attached statement			
35	Does the organization certify that it has complied with the applicable requirements of			
	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C.B 587, covering racial nondiscrimination? If 'No,' attach an explanation	35		
BAA			90-EZ)	2007

Part VI-A Lobbying Expenditures by Electing Public Charities (See Instructions )
(To be completed ONLY by an eligible organization that filed Form 5768)

3.7	•	70	
NI	,	Δ	

Chec	k ► a	If the organization belongs	to an affiliated group.	Check ► b	lf y	ou checke	ed 'a' and 'limited cont	rol' provisions apply.
	•		bbying Expenditure  ' means amounts paid or				<b>(a)</b> Affiliated group totals	(b) To be completed for all electing organizations
36	Total lo	obying expenditures to influen	ce public opinion (grassro	oots lobbying).		36		
37	Total lo	obying expenditures to influen	ce a legislative body (dire	ct lobbying)		37		
38	Total lo	obying expenditures (add lines	36 and 37)			38		
39	Other e	xempt purpose expenditures.	•			39		
40	Total ex	empt purpose expenditures (a	add lines 38 and 39)			40		
41	Lobbyin	g nontaxable amount. Enter th	ne amount from the follow	nng table –				
	If the ar	nount on line 40 is —	The lobbying nontax	cable amount i	s –			
	Not ove	r \$500,000	20% of the amount of	n line 40				
	Over \$500	,000 but not over \$1,000,000	\$100,000 plus 15% of the	excess over \$500,0	00			
	Over \$1,00	00,000 but not over \$1,500,000	\$175,000 plus 10% of the	excess over \$1,000	,000	- 41		
	Over \$1,50	00,000 but not over \$17,000,000	\$225,000 plus 5% of the e	xcess over \$1,500,	000			
	Over \$1	7,000,000	\$1,000,000				=	
42	Grassro	ots nontaxable amount (enter	25% of line 41)			42		
43	Subtrac	t line 42 from line 36 Enter -0	)- if line 42 is more than li	ine 36		43		
44	Subtrac	t line 41 from line 38 Enter -0	)- if line 41 is more than li	ine 38		44		
_	Caution	: If there is an amount on eith	ner line 43 or line 44, you	must file Form	4720			
		<del> </del>						

4 -Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50)

		Lobbying Expenditures During 4 -Year Averaging Period							
	Calendar year (or fiscal year beginning in) ►	<b>(a)</b> 2007	<b>(b)</b> 2006	(c) 2005	<b>(d)</b> 2004	<b>(e)</b> Total			
45	Lobbying nontaxable amount								
46	Lobbying ceiling amount (150% of line 45(e))								
47	Total lobbying expenditures								
48	Grassroots non- taxable amount			_					
49	Grassroots ceiling amount (150% of line 48(e))								
50	Grassroots lobbying expenditures								

Lobbying Activity by Nonelecting Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (add lines c through h.)
  - If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities

Yes	No	Amount

a Transfers from the reporting organization to a noncharitable exempt organization of.

Yes No

# Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See Instructions)

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

<b>(i)</b> Ca	ash				51 a (i)	X
<b>(ii)</b> Ot	ther assets				a (ii)	X
<b>b</b> Other	transactions					
(i)Sa	ales or exchanges of ass	sets with a r	oncharitable exempt organization		b (i)	X
<b>(ii)</b> Ρι	urchases of assets from	a noncharita	able exempt organization		b (ii)	X
(iii)Re	ental of facilities, equipm	nent, or othe	er assets		b (iii)	X
, ,	eimbursement arrangem	ents			b (iv)	X
	ans or loan guarantees				b (v)	X
			nip or fundraising solicitations		b (vi)	X
c Sharin	ng of facilities, equipmen	it, mailing li	sts, other assets, or paid employees			<u> </u>
the go	answer to any of the abo ods, other assets, or se	ove is Yes, rvices given	complete the following schedule. Co by the reporting organization. If the how in column (d) the value of the g	olumn (b) should always show the fa organization received less than fair	iir market value of market value in	ī
					ived.	
(a) Line no	<b>(b)</b> Amount involved	Name of	(c) noncharitable exempt organization	Description of transfers, transactions,	and sharing arrangeme	ents
				because of dialogue, and added one,		
N/A		<del> </del>			<del></del>	
		<del> </del>				
		<del> </del>	·			<del></del>
	<del></del>					
-		<b></b>		, , , , , , , , , , , , , , , , , , ,		
		<del> </del>		•	······	
	· · · · · · · · · · · · · · · · · · ·	<u> </u>				
	-		<del></del>			
	<del></del>			<u> </u>		
				<del></del>		
			<del>-</del>			
<u> </u>						
52a is the descri	organization directly or i bed in section 501(c) of	indirectly aff the Code (o	filiated with, or related to, one or mo ther than section 501(c)(3)) or in sec	re tax-exempt organizations ction 527?	► Yes X	No
	,' complete the following					J
	(a)	9 001100010	(b)	(c)	<del></del>	
	Name of organization		Type of organization	(c) Description of rela	tionship	
N/A	· · · ·					
		<del></del>				
					-	
	<u> </u>					
		•				
BAA				Schedule A (Fe	orm 990 or 990-E2	Z) 2007

2007

### **Federal Statements**

Page 1

**Community Athletic Coordinating Council** 

68-0448885

Statement 1 Form 990, Part I, Line 9 Net Income (Loss) from Special Events

Special Events		Gross <u>Receipts</u>	Less Contri- butions	Gross Revenue	Less Direct Expenses	Net Income (Loss)
Legendary Race	Total	2,937. \$ 2,937.	<u>0.</u> \$ 0.	2,937. \$ 2,937.	1,644. \$ 1,644.	1,293. \$ 1,293.

Statement 2 Form 990, Part II, Line 22b Other Grants and Allocations

Cash Grants and Allocations

Donee's Name: Donee's Address: Lake Tahoe Unified School District 1100 Lyons Ave

S Lake Tahoe, CA 96150

Amount Given:

\$ 25,000.

Total Grants and Allocations \$ 25,000.

Statement 3 Form 990 , Part III **Organization's Primary Exempt Purpose** 

Enhance athletic activities within the South Lake Tahoe Basin.