Form	990-T	E	xempt Organization Bus			ax Return	·	OMB No. 1545-0687
	tment of the Treasury		(and proxy tax und	ler se	ction 6033(e))			Open to Public Inspection for
	I Revenue Service	For c	alendar year 2010 or other tax year beginning		, and ending		ŧ	501(c)(3) Organizations Only
A L	Check box if address changed		Name of organization (Land Check box if name c		,		(Empl	oyees' trust, see ctions.)
	cempt under section	Print	Izaak Walton League of					6-1930035
X	501(c)(3)	or Type	Number, street, and room or suite no. If a P.O. box	x, see in	structions.			ated business activity codes astructions.)
<u> </u>	408(e)220(e)		707 Conservation Lane					
	408A530(a)		City or town, state, and ZIP code	. 0			4.40	000 00004
	529(a)	F One	Gaithersburg, MD 2087	8			448	000 900004
	ok value of all assets end of year		exemption number (See instructions.)	<u> </u>	501(c) trust	40.1(a) truet		Other trust
	,535,506.	G Check	corganization type X 501(c) corporation	п ∟	50 I(C) trust	401(a) trust	L	Other trust
		n'e nrim	ary unrelated business activity. ▶ Sale of	me.	rchandise &	group li	fe	ingurance
			poration a subsidiary in an affiliated group or a parei				Ye	
			tifying number of the parent corporation.	iii Subsi	ulary controlled group:		10	3 [22] 110
_			David Hoskins		Telepho	ne number \triangleright 3	01-	548-0150
			de or Business Income		(A) Income	(B) Expenses		(C) Net
	Gross receipts or sale		7,368.					
b	Less returns and allo	wances	c Balance▶	1c	7,368.			
2	Cost of goods sold (S	Schedule	A, line 7)	2	6,954.			
3			om line 1c	3	414.			414.
4 a	Capital gain net incor	ne (attac	h Schedule D)	4a				
b	Net gain (loss) (Form	1 4797, P	art II, line 17) (attach Form 4797)	4b				
C	Capital loss deductio	n for trus	sts	4c				
5			ips and S corporations (attach statement)	5				
				6				
7			ne (Schedule E)	7				
8		-	and rents from controlled organizations (Sch. F)	8				
			on 501(c)(7), (9), or (17) organization					
				9	1 246	1 4	F 4	200
			me (Schedule I)	10	1,246.	1,4	54.	-208.
			3 J)	11				
			ns; attach schedule.) gh 12	12	1,660.	1,4	5.1	206.
			ot Taken Elsewhere (See instructions fo			1 , 1	J = •	200•
			utions, deductions must be directly connecte		,	income.)		
14			rectors, and trustees (Schedule K)				14	
15							15	2,821.
16							16	
17							17	
18							18	
19 20	Charitable contribut	iono (Co	e instructions for limitation rules.)				19 20	
21			562)				20	
22			n Schedule A and elsewhere on return				22b	
23			- Constitution of the cons				23	
24			mpensation plans				24	
25							25	1,128.
26			chedule I)				26	
27			hedule J)				27	
28	Other deductions (a	ttach sch	nedule)		See State	ement 1	28	4,128.
29			es 14 through 28				29	8,077.
30	Unrelated business	taxable i	ncome before net operating loss deduction. Subtrac	ct line 29	from line 13		30	-7,871.
31			ı (limited to the amount on line 30)				31	
32			ncome before specific deduction. Subtract line 31 fr				32	-7,871.
33			y \$1,000, but see instructions for exceptions.)				33	1,000.
34			able income. Subtract line 33 from line 32. If line	-			34	-7,871.

023701 03-03-11 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-1 (2t	. 110011 1011 100310 01 11101 1 1 1 1 1 1	1003	·	. ugo L
	Tax Computation			
35 Or	ganizations Taxable as Corporations. See instructions for tax computation.			
Co	ontrolled group members (sections 1561 and 1563) check here 🕨 🔙 See instructions and:			
a En	ter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):	1 1		
(1		1 1		
	ter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$	1		
		1 1		
) Additional 3% tax (not more than \$100,000)	05-		Λ
c in	come tax on the amount on line 34	35c		0.
36 <u>Tr</u>	usts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:	1 1		
L.	Tax rate schedule or Schedule D (Form 1041)	36		
37 Pr	roxy tax. See instructions	37		
	ternative minimum tax	38		.,,
	otal. Add lines 37 and 38 to line 35c or 36, whichever applies			0.
Dart IV	Tax and Payments	1 00 1		
	reign tax credit (corporations attach Form 1118; trusts attach Form 1116) 40a	ТТ		
		- 1		
	ther credits (see instructions)			
	eneral business credit. Attach Form 3800 40c	_		
d Cr	edit for prior year minimum tax (attach Form 8801 or 8827)	_		
e Te	otal credits. Add lines 40a through 40d	40e		
	ubtract line 40e from line 39			0.
42 01	ther taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	42		
	otal tax. Add lines 41 and 42		· · · · · · · · · · · · · · · · · · ·	0.
	ayments: A 2009 overpayment credited to 2010 44a	 10		
		-		
Cla	ax deposited with Form 8868 44c	4 1		
	oreign organizations; Tax paid or withheld at source (see instructions)	-		
e Ba	ackup withholding (see instructions) 44e]		
f C	redit for small employer health insurance premiums (Attach Form 8941)	7 1		
g O	ther credits and payments: Form 2439 Form 4136 Other Total 44g	7		
Ī	Form 4136 Other Total > 44g	1 1		
45 T	otal payments. Add lines 44a through 44g	45		
40 E	stimated tax penalty (see instructions). Check if Form 2220 is attached	46		
				0.
	ax due. If line 45 is less than the total of lines 43 and 46, enter amount owed			
	verpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	48	/	0.
	nter the amount of line 48 you want: Credited to 2011 estimated tax	49		
Part V	Statements Regarding Certain Activities and Other Information (see instructions)			
1 At any	time during the 2010 calendar year, did the organization have an interest in or a signature or other authority over a financial a	ccount	Yes	s No
(bank,	securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank	c and		
Financ	ial Accounts. If YES, enter the name of the foreign country here		İ	x
2 During	the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? see instructions for other forms the organization may have to file.			X
	the amount of tax-exempt interest received or accrued during the tax year >\$		·····	+
	L. A. GJ. (OJ. O-1J			
	tory at beginning of year 1 0 6 Inventory at end of year	6		0.
2 Purch				
	of labor 3 from line 5. Enter here and in Part I, line 2	. [_7_]	6,	<u>954.</u>
4a Additi	onal section 263A costs 4a 8 Do the rules of section 263A (with respect to		Yes	s No
b Other	costs (attach schedule) 4b property produced or acquired for resale) apply to			T
5 Total.	Add lines 1 through 4b. 5 6,954. the organization?		į	x
	Under penalties of periory, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my kn	nowledge a	nd belief, it is true,	
Sign	correct, and complete. Declaration of proparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
Here		-	S discuss this retu	
			er shown below (se	:
			s)? X Yes	No
	(Prínt/Type preparer's name Preparer's signature Date Check	if PTI	N	
Paid	self- employe	d		
	Frank H. Smith Frank H. Smith 09/20/11 self-employee	1₽0	0639053	
Prepar	er Similarama N DAERA D. C.		2-15112	
Use Or	1899 L Street, NW, Suite 900			
	Firm's address Washington, DC 20036 Phone no.	202	-822-50	0.0
000741 00 0			Form 990 -	
023711 03-0	4-11 3.7		101111 990 -	(2010)

Form 990-T (2010) Izaak V Schedule C - Rent Inco	<u>Malto</u> me (Fr	on Leac rom Real	<u>rue o</u> Propei	f Amrty and	<u>erica,</u> d Personal	Inc. Property	y Lease	36-19 d With Real P	300 rope	rty)(see instructions)	
1. Description of property											
(1)											
(2)											
(3)											
(4)											
	2	. Rent receive	ed or accrue	ed							
(a) From personal property (if rent for personal property 10% but not more that	is more that	tage of in	(b) F	of rent for p	nd personal proper ersonal property ex t is based on profit	kceeds 50% oi	entage r if	3(a) Deductions dire columns 2(a	ectly con a) and 2(nected with the income in b) (attach schedule)	
(1)											
(2)											
(3)											
(4)		•					_				
Total		0.	Total				0.	/b) T-1-1 d- d1'	_		
(c) Total income. Add totals of columere and on page 1, Part I, line 6, c	olumn (A))	▶				0.	(b) Total deductions Enter here and on page Part I, line 6, column (B)	1,	0.	
Schedule E - Unrelated	Debt-	Financed	Incom	1 e (see	instructions)			3. Deductions directly	connect	ed with or allocable	
					2. Gross inc	come from		to debt-fir			
1. Description of	debt-financ	ed property			Gross income from or allocable to debt-financed property		(a)	Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)	
(1)											
(2)											
(3)											
(4)											
debt on or allocable to debt-financed property (attach schedule) del			adjusted ba illocable to nced proper n schedule)	by column 5				7. Gross income reportable (column 2 x column 6)		8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))	
(1)						%					
(2)						%					
(3)						%					
(4)						%					
								iter here and on page 1, art I, line 7, column (A).		Enter here and on page 1, Part I, line 7, column (B).	
Totals							>		0.	0.	
Total dividends-received deducti	ons includ	ded in column	8							0 .	
Schedule F - Interest, A	nnuiti	es, Royal	ties, ar	nd Rer	its From C			nizations (see in	nstruc	tions)	
				Exemp	t Controlled O	Organization T		1-			
Name of controlled organization	on	Employer ide	entification	Net ur (loss) (s	3. prelated income see instructions)		4. f specified ents made	5. Part of column included in the conorganization's gross	4 that is trolling income	6. Deductions directly connected with income in column 5	
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organiz	ations										
7. Taxable Income 8. Net unrelate		unrelated incom see instructions		9 . To	tal of specified pay made	ments 1	in the cont			Deductions directly connected with income in column 10	
(1)											
(2)											
(3)						+					
(4)						+	ΑΙΙ	olumno E and 10	 	Add columns 6 and 44	
							Enter here	olumns 5 and 10. and on page 1, Part I, 8, column (A).	Ent	Add columns 6 and 11. er here and on page 1, Part I, line 8, column (B).	
Totals								0.		0.	
023721 03-03-11										Form 990-T (2010	

Form **990-T** (2010)

Form 990-T (2010) Izaak	Walton Lea	gue of .	Amer	rica, Inc.			36-1	930035	Page
Schedule G - Investme	ent Income of a				ganizat	tion			
(see inst	ructions)								
1 . Desc	cription of income			2. Amount of income	directly of	luctions connected schedule)		Set-asides ch schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)									
(2)									
(3)									
(4)									
				Enter here and on page 1, Part I, line 9, column (A).					Enter here and on page Part I, line 9, column (B).
Totals			▶	0.					0
Schedule I - Exploited (see instru		/ Income, C	Other	Than Advertisi	ng Inco	me			
(See msm	T	C+m+ 2		4					
1. Description of exploited activity	2. Gross unrelated business income from trade or business	Stant 2 directly connect with production of unrelated business income	eted on	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	Gross income from activity that is not unrelated business income G. Expenses attributable to column 5		butable to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).	
(1) Group Life				-					
(2) Insurance	1,246.	1,4	54.	-208.					
(3)	1,210.	<u> </u>		200.					
(4)									
(-)	Enter here and on	Enter here and	on	l					Enter here and
	page 1, Part I, line 10, col. (A).	page 1, Part line 10, col. (E							on page 1, Part II, line 26.
Totals	1,246.								
Schedule J - Advertisi			<u> </u>						
Part I Income From	Periodicals Rep	orted on a	Cons	olidated Basis					
		1							
1. Name of periodical	2. Gross advertising income	3. Dir advertising		4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, comput cols. 5 through 7.		rculation come		eadership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)									
(2)									
(3)									
(4)									
		_							_
Totals (carry to Part II, line (5))		0.	0.						0
Part II Income From	Periodicals Rep of 7 on a line-by-line ba		Sepa	rate Basis (For e	each perio	odical liste	d in Part	. II, fill in	
1. Name of periodical	2. Gross advertising income	3. Dir		4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, comput	5. Circulation income		6. Readership costs		7. Excess readership costs (column 6 minus column 5, but not more
(4)				cols. 5 through 7.				\longrightarrow	than column 4).
(1)									
(2)									
(3)									
(4)		_							
(5) Totals from Part I	Enter here and	0 • Enter here	0 and on	_				-	Enter here and
Totals, Part II (lines 1-5)	page 1, Part I line 11, col. (A								on page 1, Part II, line 27.
Schedule K - Compen					instructio	ns)			
	Name			2. Title		3. Percei			nsation attributable lated business
	NATIO			E. Hue		busines	ss	unfe	iated busilless
(1)							%		
(2)							%		
(3)							%		
(4)							%		
Total. Enter here and on page 1, I	Part II, line 14						▶		0

Form **990-T** (2010)

Form 990-T Oth	er Deductions		Statement	1
Description			Amount	
Tax return preparation fees Postage & shipping Other indirect costs		-	1,79 1,00 1,3	32.
Total to Form 990-T, Page 1, line 2	8	=	4,1	28.
Form 990-T Schedule I - Expense Production of Unr			Statement	2
Description	Activity Number	Amount	Total	
Salary and other expenses - SubTo	1,454.	1,454.		
Total of Form 990-T, Schedule I, Co	lumn 3		1,4	54.