

Short Form

OMB No 1545-1150

Form **990-EZ**

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)

2001
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year
▶ The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2001 calendar year, or tax year beginning **2001**, and ending **2001**

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

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
Showtimers of Roanoke Valley, Inc.

D Employer identification number
54 : 1488884

Number and street (or P O box, if mail is not delivered to street address) Room/suite
P O. Box 21226

E Telephone number
(540) 774-6954

City or town, state or country, and ZIP + 4
Roanoke, VA 24018-0124

F Enter 4-digit (GEN) ▶

• 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 Web site: ▶

J Organization type (check only one) — 501(c) (3) ◀ (insert no) 4947(a)(1) or 527

K Check if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts. If \$100,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ **85,471**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 35)

		1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21		
Revenue	1	Contributions, gifts, grants, and similar amounts received		12,168																										
	2	Program service revenue including government fees and contracts		60,023																										
	3	Membership dues and assessments		1,020																										
	4	Investment income		260																										
	5a	Gross amount from sale of assets other than inventory																												
	5b	Less: cost or other basis and sales expenses																												
	5c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)																												
	6	Special events and activities (attach schedule)																												
	6a	Gross revenue (not including \$ of contributions reported on line 1)																												
	6b	Less: direct expenses other than fundraising expenses																												
6c	Net income or (loss) from special events and activities (line 6a less line 6b)																													
7a	Gross sales of inventory, less returns and allowances																													
7b	Less: cost of goods sold																													
7c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)																													
8	Other revenue (describe ▶ Site Lease)			12,000																										
9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)			85,471																										
Expenses	10	Grants and similar amounts paid (attach schedule)																												
	11	Benefits paid to or for members																												
	12	Salaries, other compensation, and employee benefits			9,611																									
	13	Professional fees and other payments to independent contractors			1,293																									
	14	Occupancy, rent, utilities, and maintenance			33,109																									
	15	Printing, publications, postage, and shipping			990																									
	16	Other expenses (describe ▶ See Attached)			36,482																									
17	Total expenses (add lines 10 through 16)			81,485																										
Net Assets	18	Excess of (deficit) for the year (line 9 less line 17)			3,986																									
	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)			211,110																									
	20	Other changes in net assets or fund balances (attach explanation)																												
	21	Net assets or fund balances at end of year (combine lines 18 through 20)			215,096																									

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

(See Specific Instructions on page 39)

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	58,112	22,991
23	Land and buildings	173,916	180,634
24	Other assets (describe ▶ See Attached)	13,394	12,321
25	Total assets	245,422	215,946
26	Total liabilities (describe ▶ Payroll Withholdings)	34,312	850
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	211,110	215,096

13
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SCANNED AUG 14 2002

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 40)		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)	
What is the organization's primary exempt purpose? <u>See Attached Statement</u>			
Describe what was achieved in carrying out the organization's exempt purposes in a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title			
28	<u>See Attached</u> (Grants \$ <u>0</u>)	28a	24,113
29	(Grants \$)	28a	
30	(Grants \$)	30a	
31	Other program services (attach schedule) (Grants \$)	31a	
32	Total program service expenses (add lines 28a through 31a)	32	24,113

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See Specific Instructions on page 40)				
(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
<u>See Attached</u>				

Part V Other Information (Note the attachment requirement in General Instruction V, page 14)		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		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but NOT reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		X
a	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		X
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement)		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ <u>37a</u> <u>0</u>		X
b	Did the organization file Form 1120-POL for this year?		X
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 unpaid at the start of the period covered by this return?		X
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved <u>38b</u>		X
39	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 9 <u>39a</u>		X
b	Gross receipts, included on line 9, for public use of club facilities <u>39b</u>		X
40a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ▶ <u>0</u> ; section 4912 ▶ <u>0</u> ; section 4955 ▶ <u>0</u>		X
b	501(c)(3) and (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 an explanation		X
c	Amount of tax imposed on organization managers or disqualified persons during the year under 4912, 4955, and 4958 ▶ <u>0</u>		X
d	Enter Amount of tax on line 40c, above, reimbursed by the organization ▶ <u>0</u>		X
41	List the states with which a copy of this return is filed ▶ <u>Residency State: Virginia; No Filing Required</u>		X
42	The books are in care of ▶ <u>Eugene A. Galvin</u> Telephone no ▶ <u>(540) 774-6954</u> Located at ▶ <u>2072 McVitty Road, S.W., Roanoke, VA</u> ZIP + 4 ▶ <u>24018</u>		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here ▶ <input type="checkbox"/>		X
	and enter the amount of tax-exempt interest received or accrued during the tax year ▶ <u>43</u>		X

Including accompanying schedules and statements, and to the best of my knowledge (other than officer) is based on all information of which preparer has any knowledge

↓ 02/25/02
Date

Schedule A
(Form 990 or 990-EZ)

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

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1)
Nonexempt Charitable Trust Supplementary Information - (See separate instructions)

2001

Supplementary Information - (see separate instructions)

▶ Must be completed by the above organizations and attached to their Form 990 or 990-EZ.

Department of the Treasury
Internal Revenue Service

Name of the Organization

Showtimers of Roanoke Valley, Inc

Employer Identification Number

54-1488884

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See instructions List each one if there are none, enter 'None')

(a) Name and address of each employee paid more than \$50,000	(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				

Total number of other employees paid over \$50,000 ▶	NONE			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See instructions List each one (whether individuals or firms) If there are none, enter 'None')

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ▶	NONE	

Part III Statements About Activities (See instructions)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI A Other organizations checking 'Yes,' must complete Part VI B and attach a statement giving a detailed description of the lobbying activities		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below)		X
4 Do you have a section 403(b) annuity plan for your employees?		X
Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments		

Part IV Reason for Non-Private Foundation Status (See instructions)

The organization is not a private foundation because it is (please check only **One** applicable box)

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV A)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV A)
- 11b A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
- 12 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 charitable, etc, 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) (Also complete the Support Schedule in Part IV A)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

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

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	10,350	12,958	15,737	3,318	42,363
16 Membership fees received	880	699	797	872	3,248
17 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	65,693	60,816	44,420	53,555	224,484
18 Gross income from interest, dividends, amounts received from payments on securities loans (Section 512(a)(5)), rents, royalties, and unrelated business taxable income (less Section 511 taxes) from businesses acquired by the organization after June 30, 1975	12,483	12,143	632	645	25,903
19 Net income from unrelated business activities not included in line 18	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	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	0	0	0	0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	0	0	0	0	0
23 Total of lines 15 through 22	89,406	86,616	61,586	58,390	295,998
24 Line 23 minus line 17	23,713	25,800	17,166	4,835	71,514
25 Enter 1% of line 23	894	866	616	584	
26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24				26a
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b
c Total support for Section 509(a)(1) test. Enter line 24, column (e)					26c
d Add Amounts from column (e) for lines	18	19			26d
	22	26b			26e
e Public support (line 26c minus line 26d total)					26f
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					%
27 Organizations described on line 12:					
a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year					
(2000)	700	(1999) 700	(1998) 730	(1997) 0	
b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (include in the list organizations described in lines 5 through 11, as well as individuals). Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year					
(2000)	0	(1999) 0	(1998) 0	(1997) 0	
c Add Amounts from column (e) for lines	15	16			27c
	17	20	21		
	224,484	0	0		
d Add Line 27a total	2,130	and line 27b total		0	27d
e Public support (line 27c total minus line 27d total)					27e
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)	27f				295,998
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part V Private School Questionnaire (See instructions)
 (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?		
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?		
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) ----- ----- -----		
32	Does the organization maintain the following		
32a	a Records indicating the racial composition of the student body, faculty, and administrative staff?		
32b	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
32c	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
32d	d Copies of all material used by the organization or on its behalf to solicit contributions? 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		
33a	a Students' rights or privileges?		
33b	b Admissions policies?		
33c	c Employment of faculty or administrative staff?		
33d	d Scholarships or other financial assistance?		
33e	e Educational policies?		
33f	f Use of facilities?		
33g	g Athletic programs?		
33h	h Other extracurricular activities? If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement) ----- -----		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
34b	Has the organization's right to such aid ever been revoked or suspended? 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 sections 4 01 through 4 05 of Rev Proc 75 50, 1975 2 C B 587, covering racial nondiscrimination? If 'No,' attach an explanation		

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

N/A

Check a if the organization belongs to an affiliated group Check b if you checked 'a' and 'limited control' provisions apply

Limits on Lobbying Expenditures

(The term 'expenditures' means amounts paid or incurred)

		(a) Affiliated group totals	(b) To be completed for all electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table --		
	If the amount on line 40 is --		
	Not over \$500,000		
	Over \$500,000 but not over \$1,000,000		
	Over \$1,000,000 but not over \$1,500,000		
	Over \$1,500,000 but not over \$17,000,000		
	Over \$17,000,000		
	The lobbying nontaxable amount is --		
	20% of the amount on line 40		
	\$100,000 plus 15% of the excess over \$500,000		
	\$175,000 plus 10% of the excess over \$1,000,000		
	\$225,000 plus 5% of the excess over \$1,500,000		
	\$1,000,000		
41		41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter 0 if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter 0 if line 41 is more than line 38	44	
	Caution: If there is an amount on either line 43 or line 44, you must file Form 4720		

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) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) 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				

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

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

- a Volunteers
- 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)

Yes	No	Amount
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	

If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities

SHOWTIMERS OF ROANOKE VALLEY, INC.

EIN: 54-1488884

ATTACHMENT TO FORM 990-EZ

YEAR ENDED: DECEMBER 31, 2001

PAGE 1 - PART I - LINE 16

OTHER EXPENSES

Program Services:

Residual cost of (6) productions performed in 2000..	\$ 464
Cost of (5) productions performed in 2001.....	19,740
Cost of (3) productions planned for 2002.....	1,386
Children's workshop.....	458
Brochure and ticket sales.....	1,026
Bank fees for credit card processing.....	<u>1,039</u>
Total program services.....	<u>24,113</u>

Administrative:

Computer support.....	2,218
Chamber of Commerce/Art Council dues.....	400
Office expense.....	664
Public relations (50 th Anniversary Gala).....	7,679
Supplies.....	<u>1,408</u>
Total administrative.....	<u>12,369</u>
Grand total.....	\$ <u>36,482</u>

SHOWTIMERS OF ROANOKE VALLEY, INC.
EIN: 54-1488884
ATTACHMENT TO FORM 990-EZ
YEAR ENDED: DECEMBER 31, 2001
PAGE 1 - PART II - LINE 23

LAND AND BUILDINGS

Land Cost.....	\$ 2,103
Building Cost.....	9,147
Improvement Costs.....	<u>251,588</u>
Sub-Total.....	262,838
Accumulated Depreciation.....	(<u>82,204</u>)
Net Land & Building.....	\$ <u>180,634</u>

SHOWTIMERS OF ROANOKE VALLEY, INC.

EIN: 54-1488884

ATTACHMENT TO FORM 990-EZ

YEAR ENDED: DECEMBER 31, 2001

PAGE 1 - PART II - LINE 24

OTHER ASSETS

Equipment.....	\$ 21,283
Software.....	<u>1,224</u>
Sub-Total.....	22,507
Accumulated Depreciation.....	(<u>10,186</u>)
Total.....	\$ <u>12,321</u>

SHOWTIMERS OF ROANOKE VALLEY, INC.

EIN: 54-1488884

ATTACHMENT TO FORM 990-EZ

YEAR ENDED: DECEMBER 31, 2001

PAGE 2 - PART III - LINE 28

PRIMARY EXEMPT PURPOSE AND PROGRAM ACHIEVEMENTS

The organization's primary exempt purpose is to educate the public regarding the workings of amateur theatre and to provide entertainment through that same medium.

In 2001, the organization produced (5) plays for the general public with an all volunteer cast and crew. Both the volunteers and the general public benefitted from this exposure to amateur theatre.

SHOWTIMERS OF ROANOKE VALLEY, INC.
 EIN: 54-148884
 ATTACHMENT TO FORM 990-EZ
 YEAR ENDED: DECEMBER 31, 2001
 PAGE 2 - PART IV

LIST OF OFFICERS; DIRECTORS; TRUSTEES; AND KEY EMPLOYEES

<u>Name</u>	<u>Title & Hours Per Week</u>	<u>Compensation</u>	<u>Contributions to Employee Benefit Plans & Deferred Compensation</u>	<u>Expense Account & Other Allowances</u>
Miriam Holland 532 Chamberlain Lane Salem, VA 24153	President 15	\$ -0-	\$ -0-	\$ -0-
Vickie R. Haynie 3142 Hidden Oak Road Roanoke, VA 24018	Vice President 5	-0-	-0-	-0-
Jayne A. Brill 6016 Plantation Road Roanoke, VA 24019	Vice President 5	-0-	-0-	-0-
Belinda T. Galvin 2724 Dwight Avenue Pittsburgh, PA 15216	Treasurer 15	-0-	-0-	-0-
Karen D. Moore 3344 Crittendon Avenue, N.W. Roanoke, VA 24012	Secretary 5	-0-	-0-	-0-
Eugene A. Galvin 2072 McVitty Road, S.W. Roanoke, VA 24018	Director 10	-0-	-0-	-0-
William F. Joppich 3215 White Oak Rd. Roanoke, VA 24014	Director 5	-0-	-0-	-0-

SHOWTIMERS OF ROANOKE VALLEY, INC.

EIN: 54-148884

ATTACHMENT TO FORM 990-EZ

YEAR ENDED: DECEMBER 31, 2001

PAGE 2 - PART IV

LIST OF OFFICERS; DIRECTORS; TRUSTEES; AND KEY EMPLOYEES (CONTINUED)

George A. Thompson 4401 Lela Avenue Roanoke, VA 24019	Director 5	-0-	-0-	-0-
George R. Pruitt, Jr. 1246 Summit Avenue Roanoke, VA 24015	Director 5	-0-	-0-	-0-

Note (1): Every officer and director receives a de minimis fringe benefit of two free season tickets valued at \$45.

Note (2): The spouse of board member Eugene A. Galvin was compensated \$8,400 for services rendered to the organization.
See disclosure re: Form 990 - Schedule A; Page 2 - Part III - Line 2d.

SHOWTIMERS OF ROANOKE VALLEY, INC.
EIN: 54-1488884
ATTACHMENT TO FORM 990-EZ
YEAR ENDED: DECEMBER 31, 2001
PAGE 2 - PART V - LINE 35

BUSINESS ACTIVITIES NOT REPORTED ON FORM 990-T

The program service revenues reported in Part 1 - Line 2 of this return are substantially related to this organization's exempt purpose and therefore are not reportable on Form 990-T.

In 2000, the organization entered into a site lease agreement whereby a communications company agreed to pay a monthly rental of \$1,000 in connection with a transmission/reception tower which it erected on the organization's property. This agreement continued through 2001, and the organization received \$12,000 in rental payments. These receipts, which are reported in Part 1 - Line 8 of this return, do not constitute income from a trade or business activity reportable on Form 990-T.

SHOWTIMERS OF ROANOKE VALLEY, INC.
EIN: 54-1488884
ATTACHMENT TO FORM 990 - SCHEDULE A
YEAR ENDED: DECEMBER 31, 2001
PAGE 2 - PART III - LINE 2d

PAYMENTS TO TRUSTEES, DIRECTORS, OFFICERS, ETC.

The organization paid the spouse of a board member, Eugene A. Galvin, a total of \$8,400 during 2001. The payments were made to Mr. Galvin's spouse primarily for her services in operating the organization's box office on performance nights and for her work as an administrative assistant. A W-2 was issued to Mrs. Galvin for 2001, reporting these payments as wages.

Application for Extension of Time to File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ File a separate application for each return

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

• If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time — Only submit original (no copies needed)

Note: Form 990-T corporations requesting an automatic 6-month extension — check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print File by the due date for filing your return. See instructions	Name of Exempt Organization Showtimers of Roanoke Valley, Inc.	Employer Identification Number 54-1488884
	Number, Street, and Room or Suite Number. If a P.O. Box, see instructions P.O. Box 21226	
	City, Town or Post Office. For a foreign address, see instructions Roanoke	State ZIP Code VA 24018-0124

Check type of return to be filed (file a separate application for each return)

- | | | |
|--|--|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (Section 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

• 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) _____ If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 month, for 990-T corporation) extension of time until Aug 15, 20 02, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year 20 01 or
▶ tax year beginning _____, 20 _____, and ending _____, 20 _____

2 If this tax year is for less than 12 months, check reason. Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See Instructions \$ _____

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made include any prior year overpayment allowed as a credit \$ _____

c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See Instructions \$ _____

Signature and Verification

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, and that I am authorized to prepare this form.

Signature ▶ David P. Lucas Title ▶ CPA Date ▶ 5/13/02

BAA For Paperwork Reduction Act Notice, see Instructions.