

**Short Form
Return of Organization Exempt From Income Tax**

2002

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

A For the 2002 calendar year, or tax year beginning _____, 2002, and ending _____

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

C Name of organization: **Showtimers of Roanoke Valley, Inc**
Number and street (or P O box if mail is not delivered to street address): **P O Box 21226**
City or town state or country and ZIP + 4: **Roanoke VA 24018-0124**

D Employer identification number: **54-1488884**

E Telephone number: **(540) 774-6954**

F Enter 4-digit (GEN) ▶ _____

G Accounting method: Cash Accrual
Other (specify) ▶ _____

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990 PF)

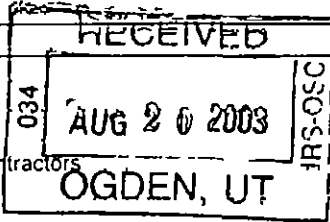
I Web site ▶ **N/A**

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 ▶ \$ **86,766**

Part I		Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions)	
REVENUE	1	Contributions, gifts, grants, and similar amounts received	13,930
	2	Program service revenue including government fees and contracts	59,040
	3	Membership dues and assessments	1,210
	4	Investment income	586
	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 ▶ <u>Site Lease</u>)	12,000	
9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	86,766	
EXPENSES	10	Grants and similar amounts paid (attach schedule)	
	11	Benefits paid to or for members	
	12	Salaries, other compensation, and employee benefits	11,816
	13	Professional fees and other payments to independent contractors	197
	14	Occupancy, rent, utilities, and maintenance	24,756
	15	Printing, publications, postage, and shipping	1,339
	16	Other expenses (describe ▶ <u>See Attached</u>)	35,819
17	Total expenses (add lines 10 through 16)	73,927	
18	Excess or (deficit) for the year (line 9 less line 17)	12,839	
NET ASSETS OR FUND BALANCES	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)	215,096
	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)	227,935



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 Instructions)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	22,991	41,736
23 Land and buildings	180,634	177,130
24 Other assets (describe ▶ <u>See Attached</u>)	12,321	9,780
25 Total assets	215,946	228,646
26 Total liabilities (describe ▶ <u>Payroll Withholdings</u>)	850	711
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	215,096	227,935

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Part III Statement of Program Service Accomplishments (See Instructions)		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 \$ 0)	28a	32,463
29			
	(Grants \$)	29a	
30			
	(Grants \$)	30a	
31	Other program services (attach schedule)	(Grants \$)	31a
32	Total program service expenses (add lines 28a through 31a)	▶ 32	32,463

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated See Instructions)				
(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 and deferred compensation	(E) Expense account and other allowances
<u>See Attached</u>				

Part V Other Information (Note the attachment requirement in the instructions)		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		
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?		N/A
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	▶ 37a	0
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	38b	N/A
39	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 9	39a	N/A
b	Gross receipts, included on line 9, for public use of club facilities	39b	N/A
40a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ▶ 0, section 4912 ▶ 0, section 4955 ▶ 0		
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		0
d	Enter Amount of tax on line 40c, above, reimbursed by the organization		0
41	List the states with which a copy of this return is filed ▶ Residency State Virginia - No Filing Required		
42	The books are in care of ▶ Eugene A Galvin Telephone no ▶ (540) 774-6954		
	Located at ▶ 2072 McVitty Road, S W, Roanoke, VA ZIP + 4 ▶ 24018		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 EZ in lieu of Form 1041 - Check here	▶ 43	N/A

I have prepared this return and accompanying schedules and statements and to the best of my knowledge and belief it is true and correct and I am not aware of any information of which preparer has any knowledge

1/8/13/03 J.E.A. Galvin, Treasurer

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)
- 11 a 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)
- 11 b 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) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	12,168	10,350	12,958	15,737	51,213
16 Membership fees received	1,020	880	699	797	3,396
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	60,023	65,693	60,816	44,420	230,952
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	12,260	12,483	12,143	632	37,518
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	85,471	89,406	86,616	61,586	323,079
24 Line 23 minus line 17	25,448	23,713	25,800	17,166	92,127
25 Enter 1% of line 23	855	894	866	616	

26 Organizations described on lines 10 or 11 a Enter 2% of amount in column (e), line 24

26a	
26b	
26c	
26d	
26e	
26f	%

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 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.

c Total support for section 509(a)(1) test. Enter line 24, column (e)

d Add Amounts from column (e) for lines 18 _____ 19 _____
22 _____ 26b _____

e Public support (line 26c minus line 26d total)

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.

(2001) _____ 985 (2000) _____ 700 (1999) _____ 700 (1998) _____ 730

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.

(2001) _____ 0 (2000) _____ 0 (1999) _____ 0 (1998) _____ 0

c Add Amounts from column (e) for lines 15 _____ 16 _____	17 _____ 20 _____	21 _____	27c	285,561
17 _____ 230,952	20 _____ 0	21 _____ 0	27d	3,115
d Add Line 27a total _____ and line 27b total _____			27e	282,446
e Public support (line 27c total minus line 27d total)			27f	323,079
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)			27g	87.42 %
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))			27h	11.61 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, 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		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
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		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
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?		
b	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	41	
	\$225,000 plus 5% of the excess over \$1,500,000		
	\$1,000,000		
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)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4 -Year Averaging Period				
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(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, 2002
PAGE 1 - PART I - LINE 16

OTHER EXPENSES

Program Services:

Residual cost of (1) production performed in 2000 .	\$	365
Residual cost of (1) production performed in 2001...		100
Cost of (5) productions performed in 2002.....		23,275
Cost of (5) productions planned for 2003.....		4,876
Workshops.....		1,014
Brochure and ticket sales.....		1,131
Bank fees for credit card processing.....		<u>1,702</u>
Total program services.....		<u>32,463</u>

Administrative:

Computer support..		758
Chamber of Commerce/Art Council dues ..		375
Office expense...		327
Public relations.....		365
Supplies.....		<u>1,531</u>
Total administrative.....		<u>3,356</u>
Grand total.....	\$	<u>35,819</u>

SHOWTIMERS OF ROANOKE VALLEY, INC.
EIN: 54-1488884
ATTACHMENT TO FORM 990-EZ
YEAR ENDED: DECEMBER 31, 2002
PAGE 1 - PART II - LINE 23

LAND AND BUILDINGS

Land Cost.	\$ 2,103
Building Cost....	9,147
Improvement Costs.....	<u>255,174</u>
Sub-Total.....	266,424
Accumulated Depreciation... ..	(<u>89,294</u>)
Net Land & Building.....	\$ <u>177,130</u>

SHOWTIMERS OF ROANOKE VALLEY, INC.

EIN: 54-1488884

ATTACHMENT TO FORM 990-EZ

YEAR ENDED: DECEMBER 31, 2002

PAGE 1 - PART II - LINE 24

OTHER ASSETS

Equipment	\$ 21,595
Software	<u>1,224</u>
Sub-Total.....	22,819
Accumulated Depreciation.....	(<u>13,039</u>)
Total.....	\$ <u>9,780</u>

SHOWTIMERS OF ROANOKE VALLEY, INC.

EIN: 54-1488884

ATTACHMENT TO FORM 990-EZ

YEAR ENDED: DECEMBER 31, 2002

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 2002, 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, 2002
 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>
Karen D Moore 3344 Crittendon Avenue, N W Roanoke, VA 24012	President 15	\$ -0-	\$ -0-	\$ -0-
George A Thompson 4401 Lela Avenue Roanoke, VA 24019	Vice President 5	-0-	-0-	-0-
Eugene A Galvin 2072 McVitty Road, S W Roanoke, VA 24018	Treasurer 15	-0-	-0-	-0-
Anne M Cooney 211 Winding Way Circle Boones Mill, VA 24065	Secretary 5	-0-	-0-	-0-
Phillip M. Boyd 2522 Spring Hollow Avenue Roanoke, VA 24012	Director 10	-0-	-0-	-0-
Cynthia Y Gaines 345 Thrush Drive, N W Roanoke, VA 24017	Director 5	-0-	-0-	-0-

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

Vickie R Haynie 3142 Hidden Oak Road, S W Roanoke, VA 24018	Director 5	-0-	-0-
Mike V Perry 206 Foxland Avenue Vinton, VA 24179	Director 5	-0-	-0-
Michael A Pilcher 2179 Floraland Drive Roanoke, VA 24012	Director 5	-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, 2002
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 2002, 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, 2002
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 2002. 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 2002, 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 03, to file the exempt organization return for the organization named above. The extension is for the organization's return for

- ▶ calendar year 20 02 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 \$ 0

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 ▶ CDA Date ▶ 5/12/03

BAA For Paperwork Reduction Act Notice, see instructions

Form 8868 (12 2000)