

Return of Organization Exempt From Income Tax

2005

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements.

Form 990 header section including: A For the 2005 calendar year, or tax year beginning, 2005, and ending; B Check if applicable; C Name of organization Showtimers of Roanoke Valley, Inc.; D Employer Identification Number 54-1488884; E Telephone number (540) 774-2660; F Accounting method: X Cash; J Organization type: X 501(c) 3; K Check here if the organization's gross receipts are normally not more than \$25,000; L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 100,465.

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

Table with 21 rows for Revenue, Expenses, and Net Assets. Revenue total (line 12) is 100,465. Total expenses (line 17) is 98,181. Net assets at end of year (line 21) is 238,737. Includes a 'RECEIVED' stamp dated NOV 20 2006 from OGDEN HLT.

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Part II 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.

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (att sch) (cash \$ 500. non-cash \$) If this amount includes foreign grants, check here <input type="checkbox"/>	22	500.	500.		
23 Specific assistance to individuals (att sch)	23				
24 Benefits paid to or for members (att sch)	24				
25 Compensation of officers, directors, etc	25	6,600.	0.	6,600.	0.
26 Other salaries and wages	26	7,595.	0.	7,595.	0.
27 Pension plan contributions	27				
28 Other employee benefits	28				
29 Payroll taxes	29	1,086.	0.	1,086.	0.
30 Professional fundraising fees	30				
31 Accounting fees	31	1,292.	0.	1,292.	0.
32 Legal fees	32	280.	0.	280.	0.
33 Supplies	33	2,025.	0.	2,025.	0.
34 Telephone	34	2,118.	0.	2,118.	0.
35 Postage and shipping	35	540.	0.	540.	0.
36 Occupancy	36	18,083.	0.	18,083.	0.
37 Equipment rental and maintenance	37				
38 Printing and publications	38	1,292.	0.	1,292.	0.
39 Travel	39				
40 Conferences, conventions, and meetings	40				
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42	8,728.	0.	8,728.	0.
43 Other expenses not covered above (itemize)					
a 2004 Theatre Production Costs	43a	383.	383.	0.	0.
b 2005 Theatre Production Costs	43b	38,070.	38,070.	0.	0.
c 2006 Theatre Production Costs	43c	183.	183.	0.	0.
d Arts Council Dues	43d	125.	125.	0.	0.
e Chamber of Commerce Dues	43e	250.	250.	0.	0.
f SCC Fee	43f	25.	0.	25.	0.
g See Other Expenses Stmt	43g	9,006.	4,337.	4,669.	0.
44 Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	98,181.	43,848.	54,333.	0.

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

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 primary exempt purpose? <input type="checkbox"/> See Attached Statement All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others.)
a <u>See Attached Statement</u> ----- ----- ----- ----- (Grants and allocations \$ 500.) If this amount includes foreign grants, check here <input type="checkbox"/>	43,848.
b ----- ----- ----- ----- (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
c ----- ----- ----- ----- (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
d ----- ----- ----- ----- (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
e Other program services (Grants and allocations \$) If this amount includes foreign grants, check here <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	43,848.

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Part IV Balance Sheets (See Instructions)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
ASSETS	45 Cash – non-interest-bearing	33,494.	45	39,283.
	46 Savings and temporary cash investments	10,340.	46	10,647.
	47a Accounts receivable	47a		
	b Less. allowance for doubtful accounts	47b	47c	
	48a Pledges receivable	48a		
	b Less. allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes & loans receivable (attach sch)	51a		
	b Less. allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments – securities (attach schedule) L-54 Stmt <input type="checkbox"/> Cost <input type="checkbox"/> FMV	11,247.	54	11,651.
	55a Investments – land, buildings, & equipment: basis	55a		
	b Less: accumulated depreciation (attach schedule)	55b	55c	
	56 Investments – other (attach schedule)		56	
	57a Land, buildings, and equipment. basis	57a	303,115.	
	b Less. accumulated depreciation (attach schedule) L-57 Stmt	57b	126,348.	182,391.
	58 Other assets (describe ▶ Refundable Payroll Taxes)		0.	58
59 Total assets (must equal line 74). Add lines 45 through 58		237,472.	59	238,737.
LIABILITIES	60 Accounts payable and accrued expenses ..		60	
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe ▶ Payroll Tax Withholdings)		1,019.	65
66 Total liabilities. Add lines 60 through 65		1,019.	66	0.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted		67	
	68 Temporarily restricted		68	
	69 Permanently restricted ..		69	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds	236,453.	72	238,737.
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19; column (B) must equal line 21)	236,453.	73	238,737.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	237,472.	74	238,737.	

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Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.)

		a	N/A
a	Total revenue, gains, and other support per audited financial statements		
b	Amounts included on line a but not on Part I, line 12:		
	1 Net unrealized gains on investments	b1	
	2 Donated services and use of facilities	b2	
	3 Recoveries of prior year grants	b3	
	4 Other (specify): _____	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	
d	Amounts included on Part I, line 12, but not on line a:		
	1 Investment expenses not included on Part I, line 6b	d1	
	2 Other (specify): _____	d2	
	Add lines d1 and d2	d	
e	Total revenue (Part I, line 12). Add lines c and d	e	

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

		a	N/A
a	Total expenses and losses per audited financial statements		
b	Amounts included on line a but not on Part I, line 17:		
	1 Donated services and use of facilities	b1	
	2 Prior year adjustments reported on Part I, line 20	b2	
	3 Losses reported on Part I, line 20	b3	
	4 Other (specify): _____	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	
d	Amounts included on Part I, line 17, but not on line a:		
	1 Investment expenses not included on Part I, line 6b	d1	
	2 Other (specify): _____	d2	
	Add lines d1 and d2	d	
e	Total expenses (Part I, line 17). Add lines c and d	e	

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the 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 plans	(E) Expense account and other allowances
See Attached Schedule		0.	0.	0.

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

75a Enter the total number of officers, directors, and trustees permitted to vote on organization business as board meetings	9	Yes	No
b Are 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, related to each other through family or business relationships? If 'Yes,' attach a statement that identifies the individuals and explains the relationship(s)			X
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 this organization through common supervision or common control? Note. Related organizations include section 509(a)(3) supporting organizations. If 'Yes,' attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization			X
d Does the organization have a written conflict of interest policy?		N/A	

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
Carol A. Galvin 2072 McVitty Road, S.W. Roanoke, VA 24018	0.	6,600.	0.	0.

Part VI Other Information (See the instructions.)

76 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	76	Yes	No
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes.	77		X
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	78b		
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	79		X
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization?	80a		X
b If 'Yes,' enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.			
81a Enter direct and indirect political expenditures. (See line 81 instructions.)	81a		
b Did the organization file Form 1120-POL for this year?	81b		X

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?	82a		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.)			
	82b		
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84 a Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
	84b		
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	N/A	
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A	
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c Dues, assessments, and similar amounts from members	85c	N/A	
d Section 162(e) lobbying and political expenditures	85d	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?	85g	N/A	
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?	85h	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 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 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX	88		X
89 a 501(c)(3) organizations. Enter. Amount of tax imposed on the organization during the year under: section 4911 ▶ <u>N/A</u> , section 4912 ▶ <u>N/A</u> , section 4955 ▶ <u>N/A</u>			
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 statement explaining each transaction	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.
90 a List the states with which a copy of this return is filed ▶ <u>Virginia</u>			
b Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)	90b		1
91 a The books are in care of ▶ <u>E. Wayne Black</u> Telephone number ▶ <u>(540) 343-6622</u> Located at ▶ <u>2266 Memorial Avenue, S.W.</u> ZIP + 4 ▶ <u>24015</u>			
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Statements	91b		X
c At any time during the calendar year, did the organization maintain an office outside of the United States? If 'Yes,' enter the name of the foreign country ▶ _____	91c		X
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ <u>92</u>			<input type="checkbox"/>

Part VII Analysis of Income-Producing Activities (See the instructions.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
Note: Enter gross amounts unless otherwise indicated					
93 Program service revenue:					
a Theatre Ticket Sales					71,311.
b Theatre Concession Sales					701.
c Program Advertising					1,163.
d Youth Drama Camp					51.
e _____					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					700.
95 Interest on savings & temporary cash invmnts					
96 Dividends & interest from securities			14	781.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
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					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b Site Lease			16	13,800.	
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				14,581.	73,926.
105 Total (add line 104, columns (B), (D), and (E))					88,507.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93a	Performances before an audience are an essential part of exposing the public to the workings of amateur theatre, which is the organization's primary exempt purpose.
	See Relationship of Activities to the Accomplishment of Exempt Purposes Statement

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets	N/A
	%				
	%				
	%				
	%				

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer: ANGELA CULL Date: 11/15/06

Type or print name and title: ANGELA CULL, PRESIDENT

Paid Preparer's Use Only

Preparer's signature: David P. Lucas, CPA Date: 11/14/06 Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: DAVID P. LUCAS, P.C.
100 UPLAND DRIVE
SALEM VA 24153

Preparer's SSN or PTIN (See General Instruction W): _____ EIN: 54-1628213 Phone no: (540) 387-1474

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**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.)

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

OMB No 1545 0047

2005

Name of the organization Showtimers of Roanoke Valley, Inc.	Employer identification number 54-1488884
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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 and deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000 ▶	None			

Part II - A 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 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 ▶	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.)		X
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.		
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?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e Transfer of any part of its income or assets? See Line 2 Stmt.	2e	X
3a Do you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how you determine that recipients qualify to receive payments.)	3a	X
b Do you have a section 403(b) annuity plan for your employees?	3b	X
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c	X
4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a	X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b	X

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). Check the box that describes the type of supporting organization. Type 1 Type 2 Type 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) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	12,445.	6,945.	13,930.	12,168.	45,488.
16 Membership fees received	980.	1,045.	1,210.	1,020.	4,255.
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	73,600.	58,023.	59,040.	60,023.	250,686.
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	13,647.	12,590.	12,586.	12,260.	51,083.
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	100,672.	78,603.	86,766.	85,471.	351,512.
24 Line 23 minus line 17	27,072.	20,580.	27,726.	25,448.	100,826.
25 Enter 1% of line 23	1,007.	786.	868.	855.	

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 2001 through 2004 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 _____
22 _____ 26b _____ **26d**

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

f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) **26f** %

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.
(2004) _____ 190. (2003) _____ 320. (2002) _____ 626. (2001) _____ 985.

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 11b, 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.
(2004) _____ 0. (2003) _____ 0. (2002) _____ 0. (2001) _____ 0.

c Add. Amounts from column (e) for lines. 15 _____ 45,488. 16 _____ 4,255.
17 _____ 250,686. 20 _____ 0. 21 _____ 0. **27c** 300,429.

d Add. Line 27a total _____ 2,121. and line 27b total _____ 0. **27d** 2,121.

e Public support (line 27c total minus line 27d total) **27e** 298,308.

f Total support for section 509(a)(2) test. Enter amount from line 23, column (e) **27f** 351,512.

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) **27g** 84.86 %

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) **27h** 14.53 %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, 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?	32a		
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
	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.) ----- -----	32d		
33	Does the organization discriminate by race in any way with respect to.			
	a Students' rights or privileges?	33a		
	b Admissions policies?	33b		
	c Employment of faculty or administrative staff?	33c		
	d Scholarships or other financial assistance?	33d		
	e Educational policies?	33e		
	f Use of facilities?	33f		
	g Athletic programs?	33g		
	h Other extracurricular activities? If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.) ----- ----- -----	33h		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
	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.	34b		
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.	35		

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		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term 'expenditures' means amounts paid or incurred.)			
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) 2005	(b) 2004	(c) 2003	(d) 2002	(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 (See instructions.)
(For reporting only by organizations that did not complete Part VI-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:

- 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

Explanation Statement

Form/Line: Schedule A, Page 2, Part III

Line 2

Explanation of: Directly or Indirectly Engage in Certain Activities

A company owned by the spouse of the organization's president was paid \$3,325 during 2005 for painting and other repairs done to the organization's building.

SHOWTIMERS OF ROANOKE VALLEY, INC.
EIN: 54-1488884
ATTACHMENT TO FORM 990
YEAR ENDED: DECEMBER 31, 2005
PAGE 3 - PART III

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 2005, the organization produced (6) plays for the general public with an all volunteer cast and crew. It also incurred pre-production costs for two plays scheduled for 2006.

Both the volunteers and the general public benefitted from this exposure to amateur theatre.

Form 990, Page 2, Part II, Line 43

Other Expenses Stmt

Other expenses not covered above (itemize):	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Credit Card Processing Fees	2,509.	2,509.	0.	0.
Ticket Processing Fees	953.	953.	0.	0.
Miscellaneous	226.	0.	226.	0.
Office Expense	938.	0.	938.	0.
Program Advertising Commission	178.	0.	178.	0.
Public Relations	1,493.	0.	1,493.	0.
Website	1,834.	0.	1,834.	0.
Youth Drama Camp & Workshop	875.	875.	0.	0.
Total	9,006.	4,337.	4,669.	0.

Form 990, Page 4, Part IV, Line 54

Investments - Securities Statement

Line 54 – Investments - Securities:	Beginning of Year	End of Year
Vanguard Short-Term Investment-Grade Fund	11,247.	11,651.
Total	11,247.	11,651.

Form 990, Page 4, Part IV, Lines 57a & 57b

Land, Buildings and Equipment Statement

	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
Land/Building/Improvements	280,279.	110,310.	169,969.
Equipment	22,836.	16,038.	6,798.
Total	303,115.	126,348.	176,767.

Supporting Statement of:

Form 990 p 3/Grants & Allocations-a

Description	Amount
Roanoke College - Sam Good Memorial	500.
Total	<u>500.</u>

Asset *	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period	
Group: 100 - Land & Building												
106	Moveable Storage Building	7/05/05	1,837.50	0.00c	0.00	0.00	45.94	45.94	1,791.56	S/L	20.0	
105	(2) Lobby Chandeliers	3/08/05	378.81	0.00c	0.00	0.00	7.89	7.89	370.92	S/L	40.0	
104	"Keyless Lock" Front Door	2/04/05	677.63	0.00c	0.00	0.00	15.53	15.53	662.10	S/L	40.0	
102	Basement Waterproofing Drainage	6/22/04	3,595.00	0.00	0.00	44.94	89.88	134.82	3,460.18	S/L	40.0	
97	Parking Stops (PN&L)	11/30/03	2,435.34	0.00	0.00	65.95	60.88	126.83	2,308.51	S/L	40.0	
96	Side Entrance Addition	9/30/03	4,900.00	0.00	0.00	153.13	122.50	275.63	4,624.37	S/L	40.0	
93	Carnier 5-Ton A/C Unit	9/06/02	2,338.75	0.00	0.00	136.43	58.47	194.90	2,143.85	S/L	40.0	
92	Lighting (Emergency & Basement)	3/21/02	1,247.77	0.00	0.00	85.78	31.19	116.97	1,130.80	S/L	40.0	
89	Carpeting	11/15/01	1,368.00	0.00	0.00	433.20	136.80	570.00	798.00	S/L	10.0	
88	Sign	8/20/01	465.27	0.00	0.00	155.10	46.53	201.63	263.64	S/L	10.0	
91	Front Porch Lighting	7/25/01	337.85	0.00	0.00	28.87	8.45	37.32	300.53	S/L	40.0	
87	Upgrade Light Booth Circuit Breaker	6/06/01	408.04	0.00	0.00	36.55	10.20	46.75	361.29	S/L	40.0	
90	Deck / Porch Roofs (2nd. Phase)	4/28/01	11,164.31	0.00	0.00	1,023.40	279.11	1,302.51	9,861.80	S/L	40.0	
81	Theatre Seats (JH Pence)	11/17/00	6,138.86	0.00	0.00	626.67	153.47	780.14	5,358.72	S/L	40.0	
82	Deck / Porch Roofs (1st. Phase)	9/13/00	4,696.70	0.00	0.00	508.82	117.42	626.24	4,070.46	S/L	40.0	
68	(9) Florescent Lamp Fixtures	12/20/99	856.00	0.00	0.00	107.00	21.40	128.40	727.60	S/L	40.0	
67	New Shingle Roof	5/14/99	3,340.00	0.00	0.00	473.17	83.50	556.67	2,783.33	S/L	40.0	
66	Box Office Improvement	4/07/99	176.59	0.00	0.00	25.36	4.41	29.77	146.82	S/L	40.0	
62	Pipe (24 Feet)	6/30/98	125.00	0.00	0.00	20.34	3.13	23.47	101.53	S/L	40.0	
52	Duct Installation & Pipes	6/30/96	915.67	0.00	0.00	194.57	22.89	217.46	698.21	S/L	40.0	
53	Electrical Circuits	6/30/96	345.00	0.00	0.00	73.35	8.63	81.98	263.02	S/L	40.0	
54	Remove Basement Windows	6/30/96	287.00	0.00	0.00	61.03	7.18	68.21	218.79	S/L	40.0	
55	Door Locks	6/30/96	94.05	0.00	0.00	19.98	2.35	22.33	71.72	S/L	40.0	
56	Box Office Counter Improvement	6/30/96	28.72	0.00	0.00	6.12	0.72	6.84	21.88	S/L	40.0	
57	Concession Stand Improvement	6/30/96	121.00	0.00	0.00	25.75	3.03	28.78	92.22	S/L	40.0	
58	Lights & Panel (Light Booth)	6/30/96	271.71	0.00	0.00	57.72	6.79	64.51	207.20	S/L	40.0	
44	Outside Door Replacement	6/30/95	3,245.78	0.00	0.00	770.83	81.14	851.97	2,393.81	S/L	40.0	
45	A/C Compressor	6/30/95	508.39	0.00	0.00	120.74	12.71	133.45	374.94	S/L	40.0	
46	Rewire Stage Lighting	6/30/95	474.73	0.00	0.00	112.76	11.87	124.63	350.10	S/L	40.0	
47	Parking Lot Surface Treatment	6/30/95	5,580.00	0.00	0.00	2,650.50	279.00	2,929.50	2,650.50	S/L	20.0	
48	Theatre Chairs	6/30/95	2,454.85	0.00	0.00	583.02	61.37	644.39	1,810.46	S/L	40.0	
30	Sign Work	6/30/93	947.21	0.00	0.00	544.64	47.36	592.00	355.21	S/L	20.0	
31	Landscaping - Bank/Parking Lot	6/30/93	3,698.72	0.00	0.00	2,126.81	184.94	2,311.75	1,386.97	S/L	20.0	
32	Carpet	6/30/93	170.50	0.00	0.00	170.50	0.00	170.50	0.00	S/L	10.0	
33	New Dressing Room	6/30/93	65.07	0.00	0.00	18.74	1.63	20.37	44.70	S/L	40.0	
34	Connecting Theatre Seats	6/30/93	125.00	0.00	0.00	35.99	3.13	39.12	85.88	S/L	40.0	
35	Grand Drapes	6/30/93	1,644.00	0.00	0.00	945.30	82.20	1,027.50	616.50	S/L	20.0	
36	Stage Curtains	6/30/93	1,756.69	0.00	0.00	1,010.05	87.83	1,097.88	658.81	S/L	20.0	
18	Receptacles/Lights	6/30/92	192.00	0.00	0.00	60.00	4.80	64.80	127.20	S/L	40.0	
19	Scaffold	6/30/92	200.00	0.00	0.00	62.50	5.00	67.50	132.50	S/L	40.0	
20	Grand Drapes, Teasers, etc.	6/30/92	6,889.00	0.00	0.00	4,305.63	344.45	4,650.08	2,238.92	S/L	20.0	
21	Water Heater/New Pipes	6/30/92	385.00	0.00	0.00	120.37	9.63	130.00	255.00	S/L	40.0	
22	Heat & A/C Units	6/30/92	10,882.00	0.00	0.00	3,400.63	272.05	3,672.68	7,209.32	S/L	40.0	
23	Architect Fees	6/30/92	3,791.00	0.00	0.00	1,184.75	94.78	1,279.53	2,511.47	S/L	40.0	
24	Legal Fees/Rezoning	6/30/92	1,216.00	0.00	0.00	380.00	30.40	410.40	805.60	S/L	40.0	
25	Parking Lot Upgrade	6/30/92	2,100.00	0.00	0.00	1,312.50	105.00	1,417.50	682.50	S/L	20.0	
26	Electrical Upgrade	6/30/92	1,066.00	0.00	0.00	333.13	26.65	359.78	706.22	S/L	40.0	
27	Carpet & Tile	6/30/92	2,208.00	0.00	0.00	2,208.00	0.00	2,208.00	0.00	S/L	10.0	
28	Phone Lines	6/30/92	105.00	0.00	0.00	32.87	2.63	35.50	69.50	S/L	40.0	

Asset *	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period	
Group: 100 - Land & Building (continued)												
29	Stage Lighting	6/30/92	1,973 00	0 00	0 00	616 62	49 33	665 95	1,307 05	S/L	40 0	
16	Building Renovation	6/30/91	118,000 00	0 00	0 00	39,825 00	2,950 00	42,775 00	75,225 00	S/L	40 0	
17	Stage Area Heating	6/30/91	3,126 00	0 00	0 00	1,055 03	78 15	1,133 18	1,992 82	S/L	40 0	
15	Architect Fees	6/30/90	809.51	0 00	0 00	293 48	20 24	313 72	495 79	S/L	40 0	
14	Electrical Work	6/30/87	2,954 00	0 00	0 00	1,292 38	73 85	1,366 23	1,587 77	S/L	40 0	
11	Imp Lobby/Restrooms/Light Booth	6/30/86	1,377 06	0 00	0 00	636.95	34.43	671 38	705.68	S/L	40 0	
12	Rewiring Lights	6/30/86	1,097.20	0 00	0 00	507 46	27.43	534 89	562 31	S/L	40 0	
13	New Front Deck & Sign	6/30/86	1,603 85	0 00	0 00	741 85	40.10	781 95	821 90	S/L	40 0	
10	Imp. Lobby/Restrooms/Light Booth	1/01/85	29,007.77	0 00	0 00	14,503 80	725 19	15,228 99	13,778 78	S/L	40 0	
8	Improvement. No Description	6/30/64	2,614 85	0 00	0 00	392 22	65.37	457 59	2,157 26	S/L	40 0	
9	Studio Improvement	6/30/64	6,298 78	0 00	0 00	6,298.78	0 00	6,298 78	0 00	S/L	40 0	
6	Improvement No Description	6/30/63	438 91	0 00	0 00	65 82	10 97	76 79	362 12	S/L	40 0	
7	Studio Improvement	6/30/63	652 57	0 00	0 00	652 57	0 00	652 57	0 00	S/L	40 0	
4	Improvement No Description	6/30/62	684.00	0 00	0 00	102 60	17.10	119 70	564.30	S/L	40 0	
5	Studio Improvement	6/30/62	135 65	0 00	0 00	135 65	0 00	135 65	0 00	S/L	40 0	
1	Land	6/30/61	2,103 00	0 00	0 00	0 00	0 00	0 00	2,103.00	Memo	40 0	
2	Building	6/30/61	9,147 00	0 00	0 00	9,147.00	0 00	9,147.00	0 00	S/L	40 0	
			280,278 66	0 00c	0 00	103,120 70	7,189 02	110,309 72	169,968 94			

100 - Land & Building**Group: 200 - Equipment**

103	Sanyo Refrigerator (Lobby)	2/07/05	209.99	0 00c	0 00	0 00	19 25	19 25	190 74	S/L	100
101	Dell Computer	11/12/04	1,400 57	0 00	0 00	46 69	280 11	326 80	1,073.77	S/L	50
100	(2) Vacuum Cleaners	5/08/04	177.63	0 00	0 00	11.84	17 76	29 60	148 03	S/L	100
99	Telephone - Box Office	2/11/04	188 09	0 00	0 00	17 24	18 81	36 05	152 04	S/L	100
98	Phonic Ear FM Transmitter System	1/14/04	700 00	0 00	0 00	70 00	70 00	140 00	560 00	S/L	100
95	Digital Piano (Seymour West)	2/24/03	1,442 10	0 00	0 00	264 39	144 21	408.60	1,033 50	S/L	100
94	Jiffy Costume Steamer	12/02/02	311 55	0 00	0 00	64 92	31 16	96 08	215.47	S/L	100
86	Backstage Sound System	6/13/01	1,707 23	0 00	0 00	611 75	170 72	782 47	924 76	S/L	100
85	Body Microphone/Pack	2/20/01	364 71	0 00	0 00	139 80	36 47	176 27	188 44	S/L	100
84	Lights & Sound Equipment	1/25/01	853.87	0 00	0 00	334 44	85 39	419 83	434 04	S/L	100
83	Stage Fogger	7/21/00	210 55	0 00	0 00	93 01	21 06	114 07	96 48	S/L	100
77	Sony Mini-Disc Player	12/14/99	385 61	0 00	0 00	196 01	38 56	234 57	151.04	S/L	100
76	Pentium III-500mhz Computer	11/23/99	3,065 50	0 00	0 00	3,065 50	0 00	3,065 50	0 00	S/L	50
74	HP ScanJet Scanner	11/22/99	417.98	0 00	0 00	417 98	0 00	417 98	0 00	S/L	50
75	HP DeskJet Printer	11/22/99	344.82	0 00	0 00	344 82	0 00	344 82	0 00	S/L	50
72	Hotpoint Washer	11/05/99	365.74	0 00	0 00	188.95	36 57	225 52	140 22	S/L	100
73	Hotpoint Dryer	11/05/99	292 59	0 00	0 00	151 18	29 26	180 44	112 15	S/L	100
71	HP LaserJet 2100S Printer	10/23/99	773.28	0 00	0 00	773.28	0 00	773 28	0 00	S/L	50
70	1000W "Follow" Spot Light	9/28/99	719 94	0 00	0 00	377 95	71 99	449 94	270.00	S/L	100
69	(2) Dimmer Packs	4/23/99	2,089 14	0 00	0 00	1,183.83	208 91	1,392 74	696 40	S/L	100
64	Dimmer Pack	6/30/98	1,138 85	0 00	0 00	740 28	113 89	854 17	284 68	S/L	100
60	Tape Decks & Mixers	6/30/97	614 46	0 00	0 00	460 87	61 45	522 32	92 14	S/L	100
61	Compact Disc Player	6/30/97	183 16	0 00	0 00	137 40	18 32	155 72	27 44	S/L	100
59	Sound System Upgrade	6/30/96	142 64	0 00	0 00	121 21	14 26	135 47	7.17	S/L	100
49	Follow Spot	6/30/95	188 10	0 00	0 00	178 69	9 41	188 10	0 00	S/L	100
50	Microphones	6/30/95	767 81	0 00	0 00	729 41	38 40	767 81	0 00	S/L	100
51	Twist Lock Cord Connectors	6/30/95	55 80	0 00	0 00	53 01	2 79	55 80	0 00	S/L	100

Asset *	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period	
Group: 200 - Equipment (continued)												
40	Sound System	6/30/94	962.50	0.00	0.00	962.50	0.00	962.50	0.00	S/L	10.0	
41	Fresnell (Light Instrument)	6/30/94	292.60	0.00	0.00	292.60	0.00	292.60	0.00	S/L	10.0	
42	Spot Light	6/30/94	303.05	0.00	0.00	303.05	0.00	303.05	0.00	S/L	10.0	
43	Headsets	6/30/94	304.00	0.00	0.00	304.00	0.00	304.00	0.00	S/L	10.0	
37	Stage Light Instruments	6/30/93	613.52	0.00	0.00	613.52	0.00	613.52	0.00	S/L	10.0	
38	Sound Equipment	6/30/93	949.00	0.00	0.00	949.00	0.00	949.00	0.00	S/L	10.0	
39	Aluminum Ladder	6/30/93	299.82	0.00	0.00	299.82	0.00	299.82	0.00	S/L	10.0	
	200 - Equipment		22,836.20	0.00c	0.00	14,498.94	1,538.75	16,037.69	6,798.51			
	Grand Total		303,114.86	0.00c	0.00	117,619.64	8,727.77	126,347.41	176,767.45			

SHOWTIMERS OF ROANOKE VALLEY, INC.
 EIN: 54-1488884
 ATTACHMENT TO FORM 990
 YEAR ENDED: DECEMBER 31, 2005
 PAGE 5: PART V-A

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>
Angela M. Cull 149 Wildhurst Avenue, N.W. Roanoke, VA 24012	President 15	\$ -0-	\$ -0-	\$ -0-
Karen D. Moore 3344 Crittendon Avenue, N.W. Roanoke, VA 24012	Vice President 5	-0-	-0-	-0-
Michael W. Ridenhour 122 Mountain Avenue, S.W. Roanoke, VA 24016	Treasurer 15	-0-	-0-	-0-
E. Wayne Black 2266 Memorial Avenue, S.W. Roanoke, VA 24015	Secretary 5	-0-	-0-	-0-
G. Allen Thompson 2550 Round Top Road, N.W. Roanoke, VA 24012	Director 5	-0-	-0-	-0-
Benjamin H. Addison 5411 Darby Road Roanoke, VA 24012	Director 5	-0-	-0-	-0-

SHOWTIMERS OF ROANOKE VALLEY, INC.

EIN: 54-1488884

ATTACHMENT TO FORM 990

YEAR ENDED: DECEMBER 31, 2005

PAGE 5: PART V-A

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

Cristina S. Emerson 4660 Long Acre Drive Roanoke, VA 24019	Director 10	-0-	-0-	-0-
Sharon Mullen 8 Leaning Oak Road Boones Mill, VA 24065	Director 5	-0-	-0-	-0-
Cynthia A. Keeling 4411 Cordell Drive Roanoke, VA 24018	Director 5	-0-	-0-	-0-

Note (1): Every officer and director receives a de minimis fringe benefit of two free season tickets valued at \$55.

Note (2): A company owned by the spouse of the organization's president was paid \$3,325 in 2005, for work done on the organization's building.

Form 990, Page 8, Part VIII

Relationship of Activities to the Accomplishment of Exempt Purposes Statement

Line Number ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93b	<u>Refreshments such as soft drinks, etc., are sold during intermission at the performances cited above, and are a necessary component of the entertainment experience.</u>
93c	<u>Programs are a requirement for each performance cited above. Sponsors of our amateur theatre are given an opportunity to show their support by acquiring advertising, or sponsor space within the program.</u>
93d	<u>The youth drama camp provides an opportunity to expose young people to theatre arts, which is another of the organization's exempt purposes.</u>
94	<u>Membership dues is another way of allowing the public to show its support of our organization's effort to provide exposure to amateur theatre.</u>

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).

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)

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.

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6-months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization		Employer identification number	
	Showtimers of Roanoke Valley, Inc.		54-1488884	
	Number, street, and room or suite number If a P.O. box, see instructions.			
	P.O. Box 21226		state	ZIP code
City, town or post office. For a foreign address, see instructions.		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

• The books are in the care of ► E. Wayne Black -----

Telephone No. ► (540) 343-6622 ----- FAX No. ► -----

- 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-months for a **Form 990-T corporation**) extension of time until Aug 15, 20 06, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- calendar year 20 05 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 \$ 0.

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 \$ 0.

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.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II and check this box **X**
- Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (not automatic) 3-Month Extension of Time – Must File Original and One Copy.

Type or print File by the extended due date for filing the return See instructions.	Name of Exempt Organization	Employer identification number
	Showtimers of Roanoke Valley, Inc.	54-1488884
	Number, street, and room or suite number. If a P.O. box, see instructions.	For IRS use only
	P.O. Box 21226	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	Roanoke 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 (section 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 4720	

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in care of E. Wayne Black
Telephone No. (540) 343-6622 FAX No. _____
- 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 organizations four digit Group Exemption Number (GEN) .. _____. If this is for the whole group, check this box . If it is **part** of the group, check this box and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until Nov 15, 2006.

5 For calendar year 2005, or other tax year beginning _____, 20_____, and ending _____, 20_____.

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

7 State in detail why you need the extension ... The organization changed treasurers in January of 2006, and because of the transition, an additional extension is needed in order to file a complete and accurate return.

8a 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 \$ 0.

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ 0.

c **Balance Due.** Subtract line 8b from line 8a. 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 form, 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 8/14/06

Notice to Applicant – To be Completed by the IRS

- We have approved this application. Please attach this form to the organization's return.
- We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely filed return. Please attach this form to the organization's return.
- We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested.
- Other: _____

Director _____ By _____ Date _____

Alternate Mailing Address – Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name	David P. Lucas, CPA
	Number and street (include suite, room, or apartment number) or a P.O. box number	100 UPLAND DRIVE
	City or town, province or state, and country (including postal or ZIP code)	SALEM VA 24153