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Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

2009

Department of the Treasury
Internal Revenue Service

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

Open to Public
Inspection**A For 2009 calendar year, or tax year beginning****, 2009, and ending****, 20**

<input type="checkbox"/> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Hoops for Youth Foundation Number & street (or P.O. box, if mail is not delivered to street addr.) 815 King St. Suite 309 City or town, state or country, and ZIP + 4 Alexandria VA 22314	D Employer identification number 26-1525269
		E Telephone number (703) 930-7790
		F Group Exemption Number ►

● Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting Method: Cash Accrual
Other (specify) ►

I Website: ► www.hoopsforyouthfoundation.org

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

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 65,161

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)	
REVENUE 1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming , check here ► <input type="checkbox"/> a Gross revenue (not including \$ _____ of contributions reported on line 1) b Less: direct expenses other than fundraising expenses c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 7a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 8 Other revenue (describe ►) 9 Total revenue. All lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ► 65,161	1 65,161 2 3 4 5c 6c 7c 8 9 65,161
EXPENSES 10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe ► See attachment #1) 17 Total expenses. Add lines 10 through 16 ► 75,623	10 11 12 13 1,274 14 71 15 1,953 16 72,325 17 75,623
NET ASSETS 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 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) 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 ► 32,263	18 -10,462 19 42,725 20 21 32,263

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	42,725	22 32,263
23 Land and buildings	23	
24 Other assets (describe ►)	24	
25 Total assets	42,725	25 32,263
26 Total liabilities (describe ►)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	42,725	27 32,263

For Privacy Act and Paperwork Reduction Act Notice, see the separate Instructions.

Form 990-EZ (2009)

6-7 21

Part V Other Information (Note the statement requirements in the instructions for Part V.)

	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	33	X
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	X
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a	37a	
b Did the organization file Form 1120-POL for this year?	37b	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 outstanding at the end of the period covered by this return?	38a	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter:	39a	
a Initiation fees and capital contributions included on line 9	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:		
section 4911 ► _____ ; section 4912 ► _____ ; section 4955 ► _____	40b	X
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► _____		
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ► _____		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	X
41 List the states with which a copy of this return is filed. ► VA		
42a The organization's books are in care of ► See attachment #5	Telephone no. ►	
Located at ►	ZIP + 4 ►	
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)?	42b	X
If "Yes," enter the name of the foreign country: ► _____	42c	X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?		
If "Yes," enter the name of the foreign country: ► _____		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 -- Check here ► <input type="checkbox"/>		
and enter the amount of tax-exempt interest received or accrued during the tax year ► 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

Part VI**Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Yes No
 46 X

47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Yes No
 47 X

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. Yes No
 48 X

49a Did the organization make any transfers to an exempt non-charitable related organization? Yes No
 b If "Yes," was the related organization a section 527 organization? Yes No
 49a X

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000

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, this 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	Date	6/1/10
	Type or print name and title		
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>
	H&R BLOCK PREMIUM 8330 BOONE BLVD Vienna, VA 22182		EIN <input type="checkbox"/>
			Phone no. <input type="checkbox"/>
			703-893-4440

May the IRS discuss this return with the preparer shown above? See instructions Yes No

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate Instructions.

Name of the organization

Non-Profit Organization

Employer identification number
26-1525368

Part 1 | Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation, because it is: (For lines 1 through 11, check only one box.)

The organization is not a private foundation because it is. (For lines 1 through 11, check only one box.)

1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(I)**.
 2 A school described in **section 170(b)(1)(A)(II)**. (Attach Schedule E.)
 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(III)**.
 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(III)**. Enter the hospital's name, city, and state _____
 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(IV)**. (Complete Part II.)
 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(V)**.
 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(VI)**. (Complete Part II.)
 8 A community trust described in **section 170(b)(1)(A)(VI)**. (Complete Part II.)
 9 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 exempt 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)**. (Complete Part III.)
 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 e a Type I b Type II c Type III--Functionally integrated d Type III-Other
 e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.
 f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box.
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (I) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (II) A family member of a person described in (i) above?
 (III) A 35% controlled entity of a person described in (i) or (ii) above?
 h Provide the following information about the supported organization(s)

	Yes	No
11g(I)		X
11g(II)		X
11g(III)		X

	Yes	No
11g(I)		X
11g(II)		X
11g(III)		X

**Total
For Pr**

For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")				79,181	60,005	139,186
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3.....				79,181	60,005	139,186
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						139,186

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4				79,181	60,005	139,186
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						139,186
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	100.00	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15		%
16a 33 1/3 % support test -- 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization			► <input checked="" type="checkbox"/>
b 33 1/3 % support test -- 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization			► <input type="checkbox"/>
17a 10%-facts-and-circumstances test -- 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			► <input type="checkbox"/>
b 10%-facts-and-circumstances test -- 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			► <input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			► <input type="checkbox"/>

SCHEDULE OF OTHER EXPENSES

Attachment 1: page 1 - 990-EZ Page 1, Part I, Line 16

Open to Public Inspection	For calendar year 2009 or tax period beginning	, and ending
Name of Organization Hoops for Youth Foundation		Employer Identification Number 26-1525269
Description of Other Expenses	Amount	
OTHER EXPENSES TO BALANCE	7,228	
Wristbands	162	
Insurance	721	
Website development and hosting	3,750	
Office supplies	70	
Lapel pins	294	
Wrist bands	283	
Bank checks	24	
Paypal Accounting	440	
E-Commerce addition to website	1,500	
White House Volunteerism awards	50	
Volunteers lunch meeting	129	
Food for Hill Day Reception	210	
DC Sports	562	
Kids Tournament	781	
Hill Day Event	827	
3-on-3 Tournament	1,696	
Main Event	7,035	
Auction	1,100	
Photographer	500	
Reimbursements	11,738	
Donation to Cornerstone	1,225	
Donation to St. Anthony's Scholarship Fund	10,000	
Donation to Washington Jesuit Academy	10,000	
Donation to Luke Tiahrt Foundation	10,000	
Donation to Horton's Kids	1,000	
Donation to Cease Fire Don't Smoke	1,000	
Total	72,325	

PRIMARY EXEMPT PURPOSE

Attachment 2: page 1 - 990-EZ Page 2, Part III

Open to Public Inspection	For calendar year 2009 or tax period beginning	, and ending
Name of Organization	Hoops for Youth Foundation	Employer Identification Number 26-1525269

Primary Purpose

To provide help and support to children's charities

PROGRAM SERVICE ACCOMPLISHMENT

Attachment 3: page 1 - 990-EZ Page 3, Part III

Open to Public Inspection	For calendar year 2009 or tax period beginning	, and ending
Name of Organization Hoops for Youth Foundation		Employer Identification Number 26-1525269
Part III - Statement of Program Service Accomplishments		
Grants and allocations	48,300	Amount includes foreign grants
		Program service expenses
		9,777
Exempt Purpose Achievements		

The Main Event - Member of Congress vs Lobbyist Basketball. This even is where members of Con gress and Lobbyists play basketball game with the purpose of raising mondy to help support these children's charities

PROGRAM SERVICE ACCOMPLISHMENT

Attachment 3: page 2 - 990-EZ Page 3, Part III

Open to Public Inspection	For calendar year 2009 or tax period beginning	, and ending
Name of Organization Hoops for Youth Foundation		Employer Identification Number 26-1525269
Part III - Statement of Program Service Accomplishments		
Grants and allocations	1,750	Amount includes foreign grants
		Program service expenses
		781
Exempt Purpose Achievements		

Youth Tournament - this event allows kids in the community to come together. Kids from all economic and neighborhood backgrounds come together in a weekend basketball tournament. The focus is just not basketball, but on how you take those basketball skills and use them in everyday life,

PROGRAM SERVICE ACCOMPLISHMENT

Attachment 3: page 3 - 990-EZ Page 3, Part III

Open to Public Inspection	For calendar year 2009 or tax period beginning	, and ending
Name of Organization Hoops for Youth Foundation		Employer Identification Number 26-1525269
Part III - Statement of Program Service Accomplishments		
Grants and allocations	3,600	Amount includes foreign grants
		Program service expenses
		827
Exempt Purpose Achievements		

Hill Day - This is a day on the Hill for the kids. This event takes kids from the local community and brings them together to discuss the importance of the First Amendment and why participating in the community and in their government is so important.

CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 4: page 1 - 990-EZ Page 2, Part IV

Open to Public Inspection	For calendar year 2009 or tax period beginning , and ending			
Name of Organization				Employer Identification Number
Hoops for Youth Foundation				26-1525269
(A) Name and Address	(B) Title and Average Hrs. per Week	(C) Compensation (If not paid, enter 0)	(D) Cont. to Employee Ben. Plans & Def. Comp	(E) Expense Account & Other Allowances
Paul A. Miller 11240 Waples Mill Road Suite 200 Fairfax, VA 22030	Board Chairman	0	0	0
Danny Leonard 815 King Street Suite 309 Alexandria, VA 22314	First Vice President	0	0	0
Karl Hobbs 815 King Street Suite 309	Head Coach GWU Mens	0	0	0
Monte Ward 815 King Street Suite 309	Board Secretary	0	0	0
Alexandria, VA 22314 Dave Johnson 815 King Street Suite 309	Board Member	0	0	0
Alexandria, VA 22314 Brad Knox 815 King Street Suite 309	Treasurer	0	0	0
Alexandria, VA 22314		0	0	0

BOOKS ARE IN CARE OF

Attachment 5 - 990-EZ Page 3, Part V, Line 42a

Open to Public Inspection	For calendar year 2009 or tax period beginning	, and ending	
Name of Organization Hoops for Youth Foundation		Employer Identification Number 26-1525269	
Part V - Line 42a			

Individual Name
or

Business Name:
Miller Wenhold Capitol Strategies LLC

Street Address **10623 Jones Street Suite 101 A**

U.S. Address:

Zip code **22030** City **Fairfax** State **VA**
or

Foreign Address

City

Province or State

Country

Postal code

Phone Number **(703) 930-7790**

Fax Number **(703) 359-7562**

STATEMENT #1 - Printing, publication, postage (990 EZ PG 1 Line 15)

Postage.....	34
Printing for Main event.....	1,919
 TOTAL CARRIED TO 990 EZ PG 1 Line 15.....	1,953

STATEMENT #2 - Contributions, gifts, grants (EZ1 PF1 Line 1)

Sponsorship contributions.....	53,456
Hill Day.....	3,600
Auction.....	3,642
Youth Tournament.....	1,750
3-on3 Tournament.....	2,100
Online donations.....	460
Miscellaneous.....	153
 TOTAL CARRIED TO EZ1 PF1 Line 1.....	65,161

STATEMENT #3 - Professional Fees (990-EZ PG 1 Line 13)

Godfrey & Kahn - Legal Ethics letter.....	549
Tax preparation.....	725
 TOTAL CARRIED TO 990-EZ PG 1 Line 13.....	1,274

STATEMENT #4 - Occupancy, Rent, Utilities (990-EZ PG 1 Line 14)

Storage unit.....	71
 TOTAL CARRIED TO 990-EZ PG 1 Line 14.....	71