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Form **990-EZ****Short Form**
Return of Organization Exempt From Income Tax

OMB No 1545-1150

2009**Open to Public Inspection**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)

► 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.

A For the 2009 calendar year, or tax year beginning

, 2009, and ending

, 20

B Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

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

C Name of organization

ROANOKE VALLEY GOLF HALL OF FAME

Number and street (or P.O. box if mail is not delivered to street address)

PO BOX 13253

Room/suite

City or town, state or country, and ZIP + 4

ROANOKE, VA 24032-3253

D Employer identification number

51-0237409

E Telephone number

540-989-9215

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: ►

J Tax-exempt status (check only one) — ☒ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

H Check ☒ if the organization is not required to attach Schedule 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. \$

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	1	
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	7,906
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Special events and activities (complete applicable parts of Schedule G. If any amount is from gaming, check here ☐)		
	6a	Gross revenue (not including \$ reported on line 1)	6a	110,285
	6b	Less direct expenses other than fundraising expenses	6b	48,652
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	61,633	
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe ►)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	69,539	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	55,125
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	642
	16	Other expenses (describe ► INVESTMENT MANAGEMENT FEES)	16	3,387
	17	Total expenses. Add lines 10 through 16	17	59,154
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	10,385
	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)	19	341,851
	20	Other changes in net assets or fund balances (attach explanation)	20	98,416
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	450,652

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	341,851	22 450,652
23 Land and buildings		23
24 Other assets (describe ►)		24
25 Total assets	341,851	25 450,652
26 Total liabilities (describe ►)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	341,851	27 450,652

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

Cat No 106421

Form **990-EZ** (2009)

SCANNED JUN 24 2010

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Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28 AWARDING COLLEGE SCHOLARSHIPS-AWARDED IN 2009

(Grants \$) If this amount includes foreign grants, check here

28a	55,125
-----	--------

29

(Grants \$) If this amount includes foreign grants, check here

29a

30

(Grants \$) If this amount includes foreign grants, check here

30a

31 Other program services (attach schedule)

(Grants \$) If this amount includes foreign grants, check here

31a

32 Total program service expenses (add lines 28a through 31a)

32

[illegible]

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		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		✓
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?		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
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		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a		
b	Did the organization file Form 1120-POL for this year?		✓
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?		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39	Section 501(c)(7) organizations Enter.		
a	Initiation fees and capital contributions included on line 9 39a		
b	Gross receipts, included on line 9, for public use of club facilities 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 ▶		
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		✓
41	List the states with which a copy of this return is filed ▶		
42a	The organization's books are in care of ▶ ROANOKE VALLEY GOLF HALL OF FAME Telephone no ▶ 540-989-9215 Located at ▶ 2129 ELECTRIC RD, STE 202, ROANOKE, VA ZIP + 4 ▶ 24018-0015		
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)?	Yes	No
	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 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 ▶ ☐ 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	Yes	No
			✓
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		✓

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
- 47** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a** Did the organization make any transfers to an exempt non-charitable related organization?
- b** If "Yes," was the related organization a section 527 organization?
- 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."

	Yes	No
46		☒
47		☒
48		☒
49a		☒
49b		☒

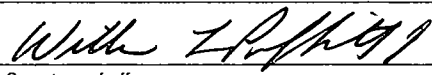
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

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

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, 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 5-11-2010 Date	WILLIAM L. PROFFITT, JR., TREASURER Type or print name and title												
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; padding: 5px;">Preparer's signature </td> <td style="width: 15%; padding: 5px;">Date</td> <td style="width: 15%; padding: 5px;">Check if self-employed ☐</td> <td style="width: 30%; padding: 5px;">Preparer's identifying number (See instructions)</td> </tr> <tr> <td colspan="3" style="padding: 5px;">Firm's name (or yours if self-employed), address, and ZIP + 4</td> <td style="padding: 5px;">EIN ▶</td> </tr> <tr> <td colspan="3" style="padding: 5px;"></td> <td style="padding: 5px;">Phone no ▶</td> </tr> </table>			Preparer's signature 	Date	Check if self-employed ☐	Preparer's identifying number (See instructions)	Firm's name (or yours if self-employed), address, and ZIP + 4			EIN ▶			
Preparer's signature 	Date	Check if self-employed ☐	Preparer's identifying number (See instructions)											
Firm's name (or yours if self-employed), address, and ZIP + 4			EIN ▶											
			Phone no ▶											

May the IRS discuss this return with the preparer shown above? See instructions ▶

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.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

ROANOKE VALLEY GOLF HALL OF FAME

Employer identification number

51 : 0237409

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

- (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?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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.")						N/A
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						
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						

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						N/A
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						
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 ► ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33½% support test—2009. If the organization did not check the box on line 13, and line 14 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐		
b 33½% support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐		
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 ► ☐		
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 ► ☐		
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 ► ☐		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 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.")	1,000					1,000
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	89,561	97,491	75,897	91,338	110,285	464,572
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total Add lines 1 through 5	90,561	97,491	75,897	91,338	110,285	465,572
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						465,572

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	90,561	97,491	75,897	91,338	110,285	465,572
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	10,777	14,706	25,209	324	7,906	58,922
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	10,777	14,706	25,209	324	7,906	58,922
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12)	101,338	112,197	101,106	91,662	118,191	524,494

14 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** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	.887 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	.882 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33⅓ % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33⅓ %, and line 17 is not more than 33⅓ %, check this box and **stop here**. The organization qualifies as a publicly supported organization ☒

b 33⅓ % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓ %, and line 18 is not more than 33⅓ %, check this box and **stop here**. The organization qualifies as a publicly supported organization ☒

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Area for supplemental information with horizontal dashed lines.

ROANOKE VALLEY GOLF HALL OF FAME
Attachment for Form 990

Line 10, Part I

Amber Altice	\$ 5,000
Caleb Castleman	2,500
Trent Mathais	5,000
Charles Blevins	2,500
Chris Chewing	1,000
Mackenzie Tyree	2,250
Sarah Ashby	1,000
Lauren Frye	1,000
Laura Landis	1,000
Devon Watts	1,000
Erin Moody	1,000
John Andrade	1,000
Lesley Arthur	500
Trevor Stewart	500
Renee Ferris	1,500
Judson Peverall	500
Matthew Harris	500
Ben Eanes	500
Lyndsay Rakes	500
Luke Wheeler	500
Daniel Schroeder	500
Jake Hooker	500
Chris Mays	500
Grayson Patterson	500
Steven Soltice	5,000
Chad Jarrett	5,000
Ben Anderson	5,000
Kendall Atkins	2,500
Robert Harbert	2,500
Ross Spencer	2,500
1st Tee of Roanoke Valley	<u>1,375</u>

\$ 55,125

Line 20, Part I

Market gain(loss) on investment securities

\$ 98,416

ROANOKE VALLEY GOLF HALL OF FAME 2009 ROSTER / BOARD MEMBERS

E. M. "Ned" Baber - Executive Director
10 S. Jefferson Street #850
Roanoke VA 24011
HOME: 776-3483
WORK: 983-7121
FAX: 344-7331
CELL: 314-3483
edgar_baber@axa-advisors.com

Carol S. Brenner - RVWGA Rep
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Fincastle VA 24090
CELL: 793-0477
csbrenner@hotmail.com

Tim Chocklett - Hunting Hills, 2009
450 Bush Drive
Vinton VA 24179
HOME: 342-9801
WORK: 890-3090 WBHS
WORK: 774-4429 HHCC
CELL: 761-1205
TgolfC@cox.net
tchocklett@rcs.k12.va.us

Miller Baber - At Large, 2009-10
523 Linden Street
Roanoke VA 24014
WORK: 983-7120
CELL: 354-8180
milleruvavt@yahoo.com

Len Mosser, Jr. - Hidden Valley, 2009
712 Joan Circle
Salem VA 24153
HOME: 389-0560
CELL: 915-6046
lmosser14@yahoo.com

Billy McBride, III - West Lake, 2009
360 Chestnut Creek Drive
Hardy VA 24101
HOME: 580-7247
WORK: 721-4214
CELL: 580-7247
bmcbride@thewillardcompanies.com

Patrick Greeley - Countryside, 2009
1212 Wasena Avenue
Roanoke VA 24015
HOME: 588-8902
abgpmg@cox.net

William L. Proffitt, Jr. - At Large Treasurer 2009-10
2129 Electric Road #202
P. O. Box 20143
Roanoke VA 24018
HOME: 774-1594
WORK: 989-9215
P4013@aol.com

Carol Bryant - Blacksburg, 2009
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Roanoke VA 24018
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clbryant8@cox.net

Rob Landis - Hanging Rock, 2009
5029 Buffalo Circle
Salem VA 24153
HOME: 380-2162
CELL: 537-4029
FAX: 382-1376
rlandis@roanoke.edu

Doug Doughty - At Large Inductee Chair, 2009-10
4328 Fox Croft Circle
Roanoke VA 24014
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FAX: 721-6765
doug.doughty@roanoke.com

C. J. Caldwell - Mariner's, 1009
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Roanoke VA 24012
CELL: 798-8181
cjcaldwell@pnsinc.net

Jerry English - At Large, 2009-10
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golfhip@cox.net

Dick Shepard - Blue Hills, 2009
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CELL: 521-0083
rcsretired@yahoo.com

Bill Shrader - Roanoke, 2009
5009 Meadowcreek Drive
Roanoke VA 24018
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shirshrader@cox.com

Jim Ketron - Botetourt, 2009
5116 Hill Drive
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CELL: 589-4951
JimK2golf@aol.com

Jean Summerbell - Secretary, 2009
5261 Peregrine Crest Circle
Roanoke VA 24018
HOME: 774-5051
jeansum45@yahoo.com

Chris Gibson - Waterfront, 2009
80 Farmers Circle
Moneta VA 24121
HOME: 721-1950
WORK: 721-0211
chns@gibsoncm.com

Todd Selkirk - Ashley Plantation, 2009
5983 Cloverdale Road
Roanoke VA 24019
WORK: 977-9727
HOME: 977-0518
todd@toddselkirk.com

Dottie Webb - Ole Monteray, 2009
4528 Long Acre Drive
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CELL: 529-2303
dottiewebb@cox.net