

Short Form Return of Organization Exempt From Income Tax

2010

Open to Public
Inspection

**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, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).
- All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 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.*

Department of the Treasury
Internal Revenue Service

A For the 2010 calendar year, or tax year beginning 01/01, 2010, and ending 12/31, 20 10

B Check if applicable:

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

C Name of organization
ROCKFISH VALLEY FOUNDATION

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
P O Box 235

City or town, state or country, and ZIP + 4
Nellysford, VA 22958

D Employer identification number
20-3481268

E Telephone number
434-361-1296

F Group Exemption Number ▶

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

I Website: ▶ www.rockfishvalley.org

J Tax-exempt status (check only one) – 501(c)(3) 501(c) () ◀ (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 \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **21,779**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.)
Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1 Contributions, gifts, grants, and similar amounts received	1		19,362
	2 Program service revenue including government fees and contracts	2		106
	3 Membership dues and assessments	3		0
	4 Investment income	4		0
	5a Gross amount from sale of assets other than inventory	5a	0	
	b Less: cost or other basis and sales expenses	5b	0	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c		0
	6 Gaming and fundraising events			
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	0	
	b Gross income from fundraising events (not including \$ <u>0</u> of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	0	
c Less: direct expenses from gaming and fundraising events	6c	0		
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		0	
7a Gross sales of inventory, less returns and allowances	7a	2,311		
b Less: cost of goods sold	7b	1,751		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		560	
8 Other revenue (describe in Schedule O)	8		0	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶	9		20,028	
Expenses	10 Grants and similar amounts paid (list in Schedule O)	10		700
	11 Benefits paid to or for members	11		0
	12 Salaries, other compensation, and employee benefits	12		0
	13 Professional fees and other payments to independent contractors	13		4,168
	14 Occupancy, rent, utilities, and maintenance	14		940
	15 Printing, publications, postage, and shipping	15		4,099
	16 Other expenses (describe in Schedule O)	16		3,786
17 Total expenses. Add lines 10 through 16 ▶	17		13,693	
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18		6,335
	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		13,910
	20 Other changes in net assets or fund balances (explain in Schedule O)	20		0
	21 Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21		20,245

Part II Balance Sheets. (see the instructions for Part II.)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	8,945	22 10,931
23 Land and buildings	5,725	23 4,294
24 Other assets (describe in Schedule O)	0	24 6,960
25 Total assets	14,670	25 22,185
26 Total liabilities (describe in Schedule O)	760	26 1,940
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	13,910	27 20,245

Part III Statement of Program Service Accomplishments (see the instructions for Part III.)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? **See Schedule O, Statement 1**

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

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

28 <u>NELSON SCENIC LOOP Creation of 50 mile loop along 4 scenic byways; held first Grand Discovery Days with over a dozen active venues along the LOOP which received much publicity and recognition. Event held (Continued on Schedule O, Statement 2)</u> (Grants \$ 5,000) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	3,296
29 <u>Tye River Study and Report; Interns undertook a study of more than 1/2 of the Tye River, wrote a pectoral report which was placed on line at rockfishvalley.com. A public meeting was held. Grant from previous year (Continued on Schedule O, Statement 3)</u> (Grants \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	1,703
30 <u>ENCOURAGE RECREATION, AN APPRECIATION OF NATURE AND A HEALTHY LIFE STYLE. birding walks by members of the Birding Committee including Tim Hodge were held on certain Saturdays during (Continued on Schedule O, Statement 4)</u> (Grants \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	1,953
31 Other program services (describe in Schedule O) (Grants \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	298
32 Total program service expenses (add lines 28a through 31a)	32	7,250

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (see the instructions for Part IV.)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Peter A Agelasto III P O Box 129, Nellysford, VA 22958	president and trustee, 40	0		
Parker Camp Agelasto 1901 Floyd Ave, Richmond, VA 23220	treasurer and trustee, 3	0	0	0
Betsy Rawls Agelasto P O Box 129, Nellysford, VA 22958	Trustee and Secretary, 7	0	0	0
Peter A Agelasto IV 2171 Beech Grove Rd, Roseland, VA 22967	trustee, 4	0	0	0
Henry A Gibb III P O Box 442, Nellysford, VA 22958	trustee, 3	0	0	0
Paul Davis 408 Hearthstone Lane, Nellysford, VA 22958	trustee, 7	0	0	0
Walter E Morgan III 257 Blue Springs Lane, Charlottesville, VA 22903	trustee, 3	0	0	0
Christopher Gensic 1014 Bolling Ave, Charlottesville, VA 22958	trustee, 3	0	0	0
Russel M Reid 86 Rainbow Ridge Road, Faber, VA 22938	trustee, 2	0	0	0
Joseph W Prueher 126 Pinewood, VA Beach, VA 23451	trustee, 2	0	0	0
Sharon A Hudson 17333 Rocky Mt Lane, Dumfries, VA 22026	trustee, 0	0	0	0
Jim Halley 107 Carriage Circle, Chapel Hill, NC 27514	trustee, 0	0	0	0
Michael Lachance 141 Drumheller Lane, Shipman, VA 22971	trustee, 1	0	0	0

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

Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		<input checked="" type="checkbox"/>
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		<input checked="" type="checkbox"/>
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, explain in Schedule O 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 a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?		<input checked="" type="checkbox"/>
b	If "Yes," has it filed a tax return on Form 990-T for this year (see instructions)?		
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		<input checked="" type="checkbox"/>
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0		
b	Did the organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
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 tax year covered by this return?		<input checked="" type="checkbox"/>
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 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0		
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 did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		<input checked="" type="checkbox"/>
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 ▶ 0		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ 0		
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.		<input checked="" type="checkbox"/>
41	List the states with which a copy of this return is filed. ▶		
42a	The organization's books are in care of ▶ <u>Peter A Agelasto III</u> Telephone no. ▶ <u>433-436-1296</u> Located at ▶ <u>p o box 129, Nellysford, VA 22958</u> ZIP + 4 ▶ <u>22958</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)?	Yes	No
	If "Yes," enter the name of the foreign country: ▶ _____		<input checked="" type="checkbox"/>
	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.?		<input checked="" type="checkbox"/>
	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		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		<input checked="" type="checkbox"/>
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		<input checked="" type="checkbox"/>
c	Did the organization receive any payments for indoor tanning services during the year?		<input checked="" type="checkbox"/>
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

		Yes	No
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?		✓
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		
45a			
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		✓

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 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

		Yes	No
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?		
49b			
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

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

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.

Sign Here	Signature of officer	Date
	<u>Peter Agelasto, President</u> Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name	Firm's EIN			
	Firm's address	Phone no.			

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

2010

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 ROCKFISH VALLEY FOUNDATION	Employer identification number 20-3481268
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Part I 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.)

- 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.
 - 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?

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

(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	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		14,300	9,620	15,675	22,764	62,359
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		0	0	0		0
3 The value of services or facilities furnished by a governmental unit to the organization without charge		0	0	0		0
4 Total. Add lines 1 through 3	0	14,300	9,620	15,675	22,764	62,359
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.						62,359

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	0	14,300	9,620	15,675	22,764	62,359
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.)					916	916
11 Total support. Add lines 7 through 10						63,275
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 checked="" type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2010. 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 type="checkbox"/>
b 33 1/3% support test—2009. 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—2010. 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—2009. 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"/>

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
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						
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.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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.)						
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <input type="checkbox"/>		

**SCHEDULE O
(Form 990 or 990-EZ)**

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization

ROCKFISH VALLEY FOUNDATION

Employer identification number

20-3481268

Form 990-EZ, Part I, Line 10 - \$700 received from DEQ for water quality monitoring was granted to North Fork Rockfish ecoli project of Charlotte Rea.

Form 990-EZ, Part I, Line 16 - 85.12 computer equip and office supplies 16.24 telephone and telecommunications 25.00 meeting expenses, conference expenses 100.00 book 332 insurance 200 membership dues 2420 advertising 387.60 food and beverage 160 misc expenses 60.38 business expenses (credit card or corporate organizational expense)

Form 990-EZ, Part II, Line 24 - Inventory asset 760.20 UNDeposited funds 1200 Receivable VA Tourism Corp 5000 total 6960.20

Form 990-EZ, Part II, Line 26 - Liabilities such as invoices for accounts payable were identified in 2010 that had not been recorded or paid in previous year. These are now reflected in organization's financial records and discrepancies resolved.

Primary Exempt Purpose

Primary Exempt Purpose

PRIMARY EXEMPT PURPOSE Education in areas of natural sciences, culture, history and rural heritage tourism in Rockfish Valley and Nelson County

First Program Service Accomplishments Description

Description

June 13 20010. In connection with this there was an antique car rally kick off at Spruce Creek Park, unveiling of LOOP print composite of sites along the LOOP done by Nelson artist Pat Saunders, a rally along the LOOP, programs and tours at Pharsalia and ELK HILL, several music festivals and events at Lescene State Forrest and Montebello Fish Hatchery. Crowd estimated at more than 500 at various venues along the route. The Virginia event to recognize the 75th Anniversary of Blue Ridge Parkway was held June 13th at Skylark. The Foundation developed the event and partnered with such as the National Park Service, Friends of Blue Ridge Parkway and Washington & Lee University. Over 400 attended and heard speakers including Carlton Abbott and others representing the foundation , NPS and Friends of BRP. Significant publicity was generated for the LOOP and Nelson County. The LOOP was awarded a \$5000 grant from the VA Tourism Corp. That grant will not be completed until 12/31/2011. It was matched by a private donor resulting in a budget of \$10000.

Second Program Service Accomplishments Description

Description

was from Chesapeake Bay restoration committee. N. Rockfish River Research Field Research and a report was undertaken on the North Fork of the Rockfish River with support of the Foundation by a team lead by Charlotte Rea. This was funded by a \$700 grant from the previous year from the VA Dept of Environmental Quality.

Third Program Service Accomplishments Description

Description

both Spring and Fall migration and other times of the year. Annual bird count was done. it is estimated that more than 50 people birded on the trails each week and more than 50 use it for exercise and picnics, etc. No exact numbers have been maintained. Member of the Birding Committee ,Marshall Faintich, published a book entitled Birds of Wintergreen which features and promotes the trails. . He is senior birding editor for the Foundation's Rockfish River Trails. A Grant received from VA Dept of Game and Island Fisheries for kiosk construction was not expended during the year..Blue bird house installations and monitoring continued with more houses added. MISSION: ENCOURAGE RECREATION , AN APPRECIATION OF NATURE AND A HEALTHY LIFESTYLE. Night Sky program undertaken in Spring and Fall 2010 with 6-10 telescopes and operators from Charlottesville Astronomical Society and 40-60 men, women and children viewers. Second annual Kite Festival April 10, 2010 was free and open to the public and attended by approx 250 people. All these events provided good community fun and education in fields related to the mission of the foundation. MANY EVENTS ARE DONE WITH VOLUNTEERS AND MINIMAL BUDGET.

Other Program Service Accomplishments

Description	Grants And Allocations	Includes Foreign Grants	Program Service Expenses
PRESERVE THE NATURAL HISTORICAL ECOLOGICAL AND AGRICULTUREAL RESOURCES. Grant received for 4000 TO MAKE A STUDY OF THE TYE RIVER. Work was undertaken and study completed but community program not undertaken until the following year.	0		0
2.MISSION History and historical programs. Program on country stores was held and attended by over 60 persons. On June 13 and 14 NELSON SCENIC LOOP Grand Discovery Days were held around the 50 mile loop with many venues participating. During the year the LOOP website was enhanced with considerable content. see www.nelsonscenicloop.com/ On the 14th the Foundation sponsored the 75th anniversary of the Blue Ridge Parkway. These were major events attended by hundreds of persons.	0		0
MISSION: TO PRESERVE THE NATURAL, HISTORICAL, ECOLOGICAL AND AGRICULTURAL RESOURCES AND PROMOTE A RURAL TOURISM EXPERIENCE. Jesus Najar and a committee of volunteers and software developers continued development of the NELSON SCENIC LOOP and its website. A good amount of work was undertaken in 2009. Grant from Preservation Piedmont and Fidelity Fund were received to support the internship of Jesus Najar. A major accomplishment was the initial creation and enhancement of the two important foundation websites: www.rockfishvalley.org and www.nelsonscenicloop.com. A Committee with Jesus Najar as the project leader, was formed to undertake the South Rockfish Rural Historic District and work continued in 2010. This was adopted as a thesis project for Jesus Najar and is to be continued.	0		0
PRESERVE THE NATURAL HISTORICAL ECOLOGICAL AND AGRICULTUREAL RESOURCES. GRANT RECEIVED FROM VA DEPT OF ENVIRONMENTAL QUALITY FOR 700 TO STUDY NORTH FORK ROCKFISH RIVER. WORK WAS COMPLETED IN 2010.	0		0
PRESERVE THE NATURAL HISTORICAL ECOLOGICAL AND AGRICULTURAL RESOURCES.Grant received from BAMA Works fund for 3000 to continue geology trail development. Trail project with James Madison University continued in the year with no money expended.	0		0
Rockfish Valley Kite Festival April event with over 250 in attendance on Spruce Creek Park big field.	0		298
Total:			298