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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 01-01-2009, and ending 12-31-2009

- 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: THETA CHI FRATERNITY ZETA-LAMBDA Alumni WESTMINSTER COLLEGE
Number and street (or P O box, if mail is not delivered to street address) Room/suite: 305 N MARKET ST
City or town, state or country, and ZIP + 4: NEW WILMINGTON, PA 16142

D Employer identification number: 25-1317759
E Telephone number: (412) 215-6242
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: [X] Cash [] Accrual Other (specify)

I Website: N/A

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

J Tax-Exempt status (check only one): [X] 501(c)(7) (insert no) [] 4947(a)(1) or [] 527

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 \$ 60,762

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

Table with 21 rows for Revenue, Expenses, and Net Assets. Revenue total: 60,762. Expenses total: 59,657. Net Assets total: 2,331.

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)

Table with 7 rows for Balance Sheets. (A) Beginning of year, (B) End of year. Total assets: 1,226. Total liabilities: 0. Net assets or fund balances: 2,331.

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.

Table with 3 columns: Question (46-49b), Yes, No. Questions cover political campaign activities, lobbying, school status, and transfers to non-charitable organizations.

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"

Table with 5 columns: (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.

50(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"

Table with 3 columns: (a) Name and address of each independent contractor paid more than \$100,000; (b) Type of service; (c) Compensation.

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

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: ***** Date: 2010-10-15. Type or print name and title: LEE SCOTT CHAIRMAN

Paid Preparer's Use Only: Preparer's signature: Rhonda W Machalk CPA Date: 2010-10-15 Check if self-employed: [] Preparer's identifying number (See instructions): EIN: Phone no: (706) 324-5435 Firm's name (or yours if self-employed), address, and ZIP + 4: Robinson Grimes & Company PC PO Box 4299 Columbus, GA 31914

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

Additional Data

Software ID:

Software Version:

EIN: 25-1317759

Name: THETA CHI FRATERNITY ZETA-LAMBDA
Alumni WESTMINSTER COLLEGE

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(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
BRAD ADAMS 305 N MARKET ST NEW WILMINGTON, PA 16142	TREASURER 0 00	0	0	0
JEREMIAH PATTERSON 305 N MARKET ST NEW WILMINGTON, PA 16142	SECRETARY 0 00	0	0	0
ERIK CHESNEY 305 N MARKET ST NEW WILMINGTON, PA 16142	PRESIDENT 0 00	0	0	0
Ryan Kirk 305 N MARKET ST nEW WILMINGTON, PA 16142	Financial Advisor 0 00	0	0	0
Lee Scott 305 N MARKET ST nEW WILMINGTON, PA 16142	Chairman 0 00	0	0	0

TY 2009 Other Expenses Schedule

Name: THETA CHI FRATERNITY ZETA-LAMBDA
 Alumni WESTMINSTER COLLEGE

EIN: 25-1317759

Description	Amount
ACCOUNTING FEES	3,833
CHAPTER DUES AND FEES	20,250
CHAPTER OPERATIONS	523

TY 2009 Other Revenues Schedule

Name: THETA CHI FRATERNITY ZETA-LAMBDA
 Alumni WESTMINSTER COLLEGE

EIN: 25-1317759

Description	Amount
COLLECTIONS	2,676
OTHER	1,400

**TY 2009 Transfers Personal Benefits
Contracts Declaration**

Name: THETA CHI FRATERNITY ZETA-LAMBDA
Alumni WESTMINSTER COLLEGE

EIN: 25-1317759

Declaration: The organization did not, during the year, receive any funds, directly, or indirectly, to pay premiums on a personal benefit contract. The organization, did not, during the year, pay any premiums, directly, or indirectly, on a personal benefit contract.