



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

OMB No 1545-1150

2009**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

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	C Name of organization Tennessee Lettermen's T Club Number and street (or P O box, if mail is not delivered to street address) Room/suite P.O. Box 47 City or town, state or country, and ZIP + 4 Knoxville, TN 37901	D Employer identification number 62-1535136 E Telephone number 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.utsports.com**J** Tax-exempt status (check only one) — ☒ 501(c) (7) ◀ (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	36,800
2	Program service revenue including government fees and contracts	2	
3	Membership dues and assessments	3	
4	Investment income	4	6,092
5a	Gross amount from sale of assets other than inventory	5a	
b	Less: cost or other basis and sales expenses	5b	
c	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 ► ☐		
a	Gross revenue (not including \$ of contributions reported on line 1)	6a	19,587
b	Less: direct expenses other than fundraising expenses	6b	17,632
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	1,955
7a	Gross sales of inventory, less returns and allowances	7a	
b	Less: cost of goods sold	7b	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8	Other revenue (describe ► Miscellaneous Merchandise Sales, Misc	8	9,076
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	53,923
Expenses			
10	Grants and similar amounts paid (attach schedule)	10	5,000
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	5,000
16	Other expenses (describe ► Miscellaneous, Legal Fees, Income Taxes,)	16	17,166
17	Total expenses. Add lines 10 through 16	17	27,166
Net Assets			
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	26,757
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	219,509
20	Other changes in net assets or fund balances (attach explanation)	20	
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	246,266

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	219,509	246,266
23 Land and buildings		
24 Other assets (describe ►)		
25 Total assets	219,509	246,266
26 Total liabilities (describe ►)		
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	219,509	246,266

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

Cat No 106421

Form **990-EZ** (2009)

SCANNED JUN 01 2010

25

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

Expenses

What is the organization's primary exempt purpose? See Attached

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

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.

28 See Attached

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

28a	6,266
------------	--------------

29 See Attached

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

29a	11,366
------------	---------------

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	17,632
-----------	---------------

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

[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 \$0.00		
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		
39 Section 501(c)(7) organizations. Enter.		
a Initiation fees and capital contributions included on line 9		
b Gross receipts, included on line 9, for public use of club facilities		
40a Section 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 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 ▶ \$0.00		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ \$0.00		
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 ▶ TN does not require a tax return to be filed		
42a The organization's books are in care of ▶ <u>Zibbie Karen</u> Telephone no. ▶ <u>865.974.9054</u> Located at ▶ <u>230 Thompson Boling Arena, 1600 Philip Fulmer Way, Knoxville, TN</u> ZIP + 4 ▶ <u>37966</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: ▶ <u>N/A</u> 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: ▶ <u>N/A</u>		
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 <u>N/A</u>		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
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 **46** ☐ **Yes** ☒ **No**
- 47** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II **47** ☐ **Yes** ☒ **No**
- 48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E **48** ☐ **Yes** ☒ **No**
- 49a** Did the organization make any transfers to an exempt non-charitable related organization? **49a** ☐ **Yes** ☒ **No**
- b** If "Yes," was the related organization a section 527 organization? **49b** ☐ **Yes** ☒ **No**
- 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."

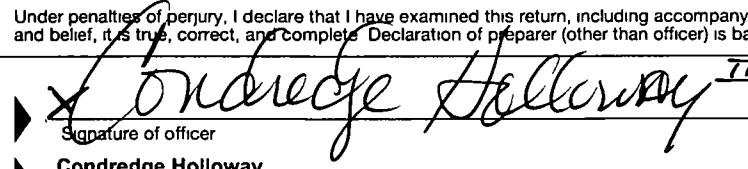
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

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

- 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 **d**

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 04/30/10	
Paid Preparer's Use Only	Condredge Holloway Type or print name and title			
	Preparer's signature 		Date 4/24/10	Check if self-employed ☒
	Firm's name (or yours if self-employed), address, and ZIP + 4 Patrick J. Reid 1106 Eastwood Ave SE, Grand Rapids, MI 49506		Preparer's identifying number (See instructions) 379-68-2830	
	EIN 616-940-3823		Phone no 616-940-3823	

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

Tennessee Lettermens T Club
62-1535136
December 31, 2009

Form 990 EZ - Part III

The primary purposes of Tennessee Lettermen's "T" Club are:

- a) To establish a national organization designed to promote and preserve the friendships and loyalties enjoyed by former athletes of the University of Tennessee, Knoxville.
- b) To support the University of Tennessee, its Athletic Board, Athletic Department, and office of Alumni Affairs, in its continuing efforts toward improving the University's facilities and programs, in its goal of maintaining a position of national prominence and reputation for all "volunteer" intercollegiate athletic teams.
- c) To foster and promote the highest principles and ethical standards of sportsmanship by participants, and to improve recognition thereof students, alumni, and spectators at all sports events at The University.
- d) Recognize outstanding achievement and service to the athletic programs of The University.
- e) To perform such other activities or things incidental to or connected with the advancement of the forgoing purposes; but not for pecuniary profit or financial gain of its members, directors, or officers, except as may be permitted by laws governing "Not-for-Profit" corporations.

Tennessee Lettermens T Club
62-1535136
December 31, 2009

Form 990 EZ - Part III

Line 28a

An annual Golf Tournament was held in the spring of 2009 which was open to all University of Tennessee Lettermen, their family and friends. The purpose of the Golf Tournament was to promote and preserve the friendships and loyalties enjoyed by former athletes of the University of Tennessee, Knoxville.

Total Expenses \$6,266

Line 29a

The Tennessee Lettermen's T Club held a Lettermen's Reunion in 2009. The purpose of the event was to recognize outstanding Tennessee Lettermen for their time contributions to the University of Tennessee and to promote and preserve the friendships and loyalties enjoyed by former athletes of the University of Tennessee, Knoxville.

Total Expenses \$11,366

December 31, 2009

Form 990 EZ - Part IV

List of Officers, Directors, Trustees and Key Employees

Name and Address	Title and Ave Hours per Week	Compensation	Contributions to Employee Benefit Plan	Expense Account and other Allowances
Jack Kile P.O. Box 47 Knoxville, TN 37901	Past President < 5 hrs	\$0.00	\$0.00	\$0.00
Bobby Gaylor P.O. Box Knoxville, TN 37901	President < 5 hrs	\$0.00	\$0.00	\$0.00
Chris Wampler P.O. Box 47 Knoxville, TN 37901	President Elect < 5 hrs	\$0.00	\$0.00	\$0.00
Bobby Gratz P.O. Box 47 Knoxville, TN 37901	Vice President < 5 hrs	\$0.00	\$0.00	\$0.00
Mike Stratton P.O. Box 47 Knoxville, TN 37901	Vice President < 5 hrs	\$0.00	\$0.00	\$0.00
Dennis Wolfe P.O. Box 47 Knoxville, TN 37901	Vice President < 5 hrs	\$0.00	\$0.00	\$0.00
Lisa Reagon P.O. Box 47 Knoxville, TN 37901	Sec/Treasurer < 5 hrs	\$0.00	\$0.00	\$0.00
Condredge Holloway P.O. Box 47 Knoxville, TN 37901	Executive Dir. 20 hrs	\$0.00	\$0.00	\$0.00
Zibbie Karen P.O. Box 47 Knoxville, TN 37901	Director 20 hrs	\$0.00	\$0.00	\$0.00
Lynne Canan P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Jeff Christensen P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Dane Bradshaw P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Guy Jackson P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Lee North P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Will Overstreet P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00

Kobbie Franklin P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Bobby Sandlin P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Tim Fitchpatrick P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Jessica Blevins P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Dayton Hylton P.O. Box Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Lisa Wiles P.O. Box Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00