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. Form 990-EZ

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

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)

Sponsoning 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.

dar year, or tax year beginning SEP 1, 2009 and ending AUG 31, 20

Open to Public Inspection

_ A			009 Ca	renuar	year, o	n tax y	<u>/ear be</u>	ginning	<u> </u>	· 1	2009		and end	ing AU	<u>G</u> 3.	<u> </u>	201	. U	
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Ass	1	(m	ust agre	e with e	nd-of-ye	ar figui	re repor	ted on prio	r year's rel	turn)					L	19		35	,806.
Net Assets	2	Oth	ner chan	iges in n	iet assets	s or fun	ıd balan	ces (attach	explanation	n)					[20			
Z	2	1 Ne	t assets	or fund	balances	s at end	d of yea	r Combine	lines 18 th	rough 20					>	21_		38	,366.
I	ar	11:	Balan	ice St	neets.	If Tota	ıl assets	on line 25	, column (l	3) are \$1,2	250,000 or m	ore, file	Form 990	instead of Fo	rm 990	-EZ			
_					(See	the in:	structio	ns for Part	II)				(A)	Beginning o	f year			(B) End of y	
2	2	Cash, s	avings.	and inve	estments									30,	539	. 22		31	,259.
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THE EAST TENNESSEE SCHOOL BAND &

Fori	m 990-EZ (2009) ORCHESTRA ASSOCIATION % P	ETER HODGES		62-	-12945	515Page:
	art III Statement of Program Service Accomplishmen		Part III)			xpenses
Wh	at is the organization's primary exempt purpose? PROMOTE INSTRU	MENTAL MUSIC	<u> </u>		1	for section 501(c)(3) (4) organizations and
	scribe what was achieved in carrying out the organization's exempt pur services provided, the number of persons benefited, and other relevan			be		47(a)(1) trusts, optiona
	SEE ATTACHED STATEMENT	<u> </u>			1	<u></u>
_						
	(Grants \$) If this amount includes foreign g	rants, check here	>		28a	61,993
29		· ·-·				
	Victor and Allertan American	. A Iv Iv. Iv				
30	(Grants \$) If this amount includes foreign g	rants, check here		<u>ш</u>	29a	
30						
					1 1	
	(Grants \$) If this amount includes foreign g	rants, check here			30a	
31	Other program services (attach schedule)	· · · · · · · · · · · · · · · · · · ·				· ·
	(Grants \$) If this amount includes foreign of	rants, check here	<u> </u>		31a	
	Total program service expenses (add lines 28a through 31a)			<u> </u>	32	61,993.
P	art IV List of Officers, Directors, Trustees, and Key E	mployees. List each one en	ven if not compensated (
		(b) Title and average hours	(c) Compensation		ontribution: employee	s (e) Expense
	(a) Name and address	per week devoted to	(If not paid, enter	bene	efit plans &	account and
		position	-0)	J	deferred npensation	other allowances
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Form **990-EZ** (2009)

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Part V Other Information (Note the statement requirements in the instructions for Part V.) Yes No X Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity 33 33 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes 34 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. 35a and proxy tax requirements? N/A 35b b If "Yes," has it filed a tax return on Form 990-T for this year? Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," Х 36 complete applicable parts of Sch N 0. 37a Enter amount of political expenditures, direct or indirect, as described in the instructions Х 37b 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 Х 38a in a prior year and still outstanding at the end of the period covered by this return? N/A 38b b If "Yes." complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations Enter N/A 39a a Initiation fees and capital contributions included on line 9 N/A 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 0. 0 • , section 4955 ► O - , section 4912 ▶ ___ section 4911 ► 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 40h X 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 Х 40e transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed NONE Telephone no \blacktriangleright (423)639-1962 42a The organization's books are in care of ▶ PETER HODGES ZIP+4 ► 37743 Located at ▶ 108 ALPINE CIRCLE, GREENEVILLE, b At any time during the calendar year, did the organization have an interest in or a signature or other authority Yes No over a financial account in a foreign country (such as a bank account, securities account, or other financial 42b account)? 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. Х c At any time during the calendar year, did the organization maintain an office outside of the U.S.? 42c If "Yes," enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here N/A ▶ 43 and enter the amount of tax-exempt interest received or accrued during the tax year Yes No Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Х 44 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 Form 990-EZ (2009)

THE EAST TENNESSEE SCHOOL BAND &

62-1294515 ORCHESTRA ASSOCIATION % PETER HODGES

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 Yes No 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 Х Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II X 47 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 48 48 49a Did the organization make any transfers to an exempt non-charitable related organization? 49a b If "Yes," was the related organization a section 527 organization? 49b Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more 50 than \$100,000 of compensation from the organization. If there is none, enter "None." (d) Contributions (b) Title and average hours (c) Compensation (e) Expense to employee (a) Name and address of each employee paid more per week devoted to benefit plans & account and than \$100,000 position deferred other allowances NONE compensation f Total number of other employees paid over \$100,000 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 " 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 holuding accompanying schedules and statements, and to the best of my knowledge and belief, it is true, used on all information of which preparer has any knowledge Under penalties of penury Sign Here Type or print name and title Check if self-Paid Preparer's signature Date 1-12-11 Preparer's employed Use Only EIN ▶ **ADAMS** Firm's name (or yours P.O. BOX 1117 Phone > if self-employed) no 423-639-0151 address, and ZIP + 4 GREENEVILLE, TN 37744

X Yes [

Form 990-EZ (2009)

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

Form 990-EZ (2009)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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.

2009

Open to Public Inspection

Name of the organization

THE EAST TENNESSEE SCHOOL BAND &

ORCHESTRA ASSOCIATION % PETER HODGES

Employer identification number 62~1294515

Part I	Reason	for Public Cha	irity Status (All organi	zations mu	st comple	te this par	t.) See ins	tructions.				_
he organ	ization is not	a private foundation	n because it is: (For lines	1 through	11, check	only one t	oox)					
1 🔲	A church, co	nvention of church	es, or association of chui	rches desc	ribed in se	ction 170	(b)(1)(A)(i).				
2			170(b)(1)(A)(ii). (Attach So									
3			pital service organization	•		170(b)(1)	(A)(iii).					
4			operated in conjunction					(Б)(1)(А)(і	ii). Enter ti	he hosoital	's nam	e
	city, and stat		, aparator in conjunction					(-/(-/(-/(-/			0	-,
5	•		e benefit of a college or u	niversity o	wned or or	perated by	a govern	mental un	ıt describe	ed in		
•		(b)(1)(A)(iv). (Comp	_			, , , , , , , , , , , , , , , , , , ,	u go toiiii	mornar arr	00001100			
6 🗀			ment or governmental uni	ıt docariba	d in contin	n 170/h\/:	11/41/64					
7								u franskha		حمداد مناطيي	مراحمات	_
/ L			eceives a substantial part	or its supp	on from a	governme	entai unit c	or from the	general p	oublic desc	ribea ir	1
• 🗀		(b)(1)(A)(vi). (Comp	•	(0 .1.1.	D . 4.113							
8 🕌			section 170(b)(1)(A)(vi).									
9 X			ceives: (1) more than 33									
		· ·	unctions - subject to certa							_		
			taxable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	anization a	fter June 3	0, 197	5.
	See section	509(a)(2) . (Comple	te Part III.)									
10	An organizat	ion organized and o	operated exclusively to te	st for publ	ıc safety. S	See sectic	n 509(a)(4	4).				
11 📖	An organizat	ion organized and o	operated exclusively for the	he benefit	of, to perfo	orm the fu	nctions of,	or to carr	y out the p	ourposes o	f one c	r
	more publicly	supported organi	zations described in secti	on 509(a)(1) or section	on 509(a)(2	2). See se c	ction 509(a)(3). Che	ck the box	that	
	describes the	e type of supporting	g organization and compl	let <u>e lin</u> es 1	1e through	11h.						
	а Туре	l bĹ	i Type II	c Typ	e III - Func	tionally int	egrated		لا ه	Type III · C)ther	
е 🔙	By checking	this box, I certify th	nat the organization is not	controlled	directly o	r indirectly	by one o	r more dis	qualified p	ersons oth	er thar	1
	foundation m	nanagers and other	than one or more publicl	y supporte	ed organiza	itions des	cribed in s	ection 50	9(a)(1) or s	ection 509	(a)(2).	
f	If the organiz	ation received a wi	ritten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganization, check	this box									
g	Since Augus	t 17, 2006, has the	organization accepted a	nv aift or c	ontribution	from any	of the foll	owing per	sons?			
•			directly controls, either a								Yes	No
			supported organization?	-				.,,	,	11g(i)		
	_	- •	on described in (i) above?	,						11g(ii)	\Box	
	•	-	a person described in (i)		e?					11g(iii)		
h		-	n about the supported or							(*** <u>9\7</u>)		
"	r tovide the i	Ollowing informatio	in about the supported of	yanızanon	(3).							
			(iii) Type of	(iv) to the c	rannization	(u) Old voi	. notifi the	(vi) Is	the			
• •	of supported	(II) EIN	organization		organization sted in your			lorganizati	on in col	(vii) Am		
orga	anization		(described on lines 1-9		document?		support?	(i) organız U S	ed in the	supp	ווסנ	
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No			
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LHA 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

Schedule A (Form 990 or 990-EZ) 2009 Part II Support Schedule for (Complete only if you checke	_			(b)(1)(A)(iv) an	nd 170(b)(1)(A)(v	Page 2
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	(2) 2000	1=7====	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
membership fees received. (Do not						
include any "unusual grants ")				İ		
2 Tax revenues levied for the organ-				_		
ization's benefit and either paid to						
or expended on its behalf					į	
3 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
4 Total. Add lines 1 through 3			<u>, , , , , , , , , , , , , , , , , , , </u>			
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	<u> </u>	<u> </u>		L		
Section B. Total Support	T	I	1 11000	4 7 0000	1 110000	40.7.1
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest,						
dividends, payments received on	İ					
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 instruct	ions)	11. d	11: 11: 11: 11: 11: 11: 11: 11: 11: 11:	12	
13 First five years. If the Form 990 is fo			rd, fourth, or fifth t	ax year as a secti	on 501(c)(3)	
organization, check this box and sto						▶ □
Section C. Computation of Pub	lic Support Pe	rcentage				
14 Public support percentage for 2009	(line 6, column (f) c	livided by line 11,	column (f))		14	%
15 Public support percentage from 200	8 Schedule A, Par	i II, line 14			15	%
16a 33 1/3% support test - 2009. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or i	more, check this bo	x and
stop here. The organization qualifies						▶□
b 33 1/3% support test - 2008. If the c				line 15 is 33 1/39	% or more, check th	is box
and stop here. The organization qua						
17a 10% -facts-and-circumstances tes		and the second s	i 1. 1	40 40 - 406		

and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the 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

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2009

THE EAST TENNESSEE SCHOOL BAND &

Schedule A (Form 990 or 990-EZ) 2009 ORCHESTRA ASSOCIATION % PETER HODGES 62-1294515 Page 3

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)

62-1294515 Page 3

Se	ction A. Public Support	·		,				
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	1	(e) 2009	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not			-				
	include any "unusual grants ")						32,498.	82,498.
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						3,239.	3,239.
3	Gross receipts from activities that							
	are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ-	1				ı		
	ızatıon's benefit and either paid to						i	
	or expended on its behalf		<u></u>					
5	The value of services or facilities							
	furnished by a governmental unit to					1	1	
	the organization without charge							
6	Total. Add lines 1 through 5						35,737.	85,737.
7 a	Amounts included on lines 1, 2, and						-	
	3 received from disqualified persons	L						0.
ŧ	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							0.
,	Add lines 7a and 7b							0.
8	Public support (Subtract line 7c from line 6)							85,737.
_	ction B. Total Support		<u> </u>	<u> </u>				
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008		(e) 2009	(f) Total
	Amounts from line 6					1	35,737.	85,737.
10	dross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						490.	490.
ŧ	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						490.	490.
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)					8	36,227.	86,227.
	First five years. If the Form 990 is fo	r the organization	's first, second, the	rd, fourth, or fifth t	tax year as a secti	on 50	l(c)(3) organiza	ition,
	check this box and stop here	•						_ X
Se	ction C. Computation of Publ	ic Support Pe	ercentage					
	Public support percentage for 2009 (column (f))		15		99.43 %
16	Public support percentage from 2008					16		%
	ction D. Computation of Inve						<u> </u>	
17						17		%
18	Investment income percentage from					18		
	33 1/3% support tests - 2009. If the			on line 14, and lin	e 15 is more than	33 1/3	3%, and line 17	' is not
	more than 33 1/3%, check this box a							▶□
	33 1/3% support tests - 2008. If the						an 33 1/3%. a	nd
	line 18 is not more than 33 1/3%, che							▶□
20	Private foundation. If the organization							▶ □
<u>20</u>	rivate loundation. If the organization	an did not check a	COA OII IIIO 14, 13	Ja, or 100, origon (or 990-FZ) 2009

FORM 990-EZ	OTHER EXPENSES	STATEMENT 1
DESCRIPTION		AMOUNT
TRAVEL, LODGING, MEALS INSURANCE HOST HONORARIUMS HOSPITALITY AWARDS MISCELLANEOUS		13,937. 500. 2,100. 4,051. 6,118. 4,271.
TOTAL TO FORM 990-EZ, LINE 16		30,977.
FORM 990-EZ	OTHER REVENUE	STATEMENT 2
DESCRIPTION		-AMOUNT
INTEREST COMMISSIONS ON T-SHIRT SALES		490. 3,239.
TOTAL TO FORM 990-EZ, LINE 8		3,729.

FORM 990-EZ	PAYMENTS TO	AFFILIATES	STATEMENT	3
AFFILIATE'S NAME		AFFILIATES ADDRESS		
TMEA	A A POSE OF PAYMENT			
PURPOSE OF PAYMENT			AMOUNT	
MEMBERSHIP		· · · · · · · · · · · · · · · · · · ·	1,8	00.
TOTAL INCLUDED ON FORM	990-EZ, LINE 10		1,8	00.
	FOOT	NOTES	STATEMENT	4

PRIOR TO JUNE 9, 2010, THE TAXPAYER WAS A 501(C)(4) ORGANIZATION. EFFECTIVE JUNE 9, 2010, THE INTERNAL REVENUE SERVICE GRANTED EXEMPTION UNDER 501(C)(3) TO THE TAXPAYER.

FOI	RM 990-EZ	INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS		STAT	EM:	ENT	5
A)	DIRECTLY OF	SANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, REC	[] YE	ES	[X]	NO
B)		SANIZATION, DURING THE YEAR, PAY PREMIUMS, R INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?	[] YE	ES	[X]	NO

	East Te	nnessee School Band	and Orches	tra Association	
	Support	Supporting Information Form 990EZ, Part III	390EZ, Part		
		Fiscal Year 2009-2010	0		
Event		Date(s)	# Served	General Expenses Description	Description
		-	1		
All State East Band & Orchestra Clinic	Clinic	February 4-6, 2010	515	\$15,053.00	Music Workshop for High School Students
All State Band & Orchestra Clinic	2	April 14-17, 2010	76	\$6,180.00	Music Workshop for High School Students
Lower Area Junior Band Clinic		Dec 11-12, 2009	279	\$3,781.00	Music Workshop for Middle School Students
Middle Area Junior Band Clinic		Dec 4-5, 2009	231	\$3,107.00	Music Workshop for Middle School Students
Upper Area Junior Band Clinic		Feb 12-13, 2010	287	\$3,499.00	Music Workshop for Middle School Students
Lower Junior Orchestra Clinic		Feb 26-27, 2010	98	\$1,422.00	Orchestra Workshop for Middle School
Middle Junior Orchesta Clinic		Nov 20-21, 2009	130	\$1,870.00	Orchestra Workshop for Middle School
Upper Junior Orchestra Clinic		Feb 12-13, 2010	113	\$784 00	Orchestra Workshop for Middle School
All State East Jazz Clinic		Jan 29-30, 2010	62	\$2,946.00	Jazz Workshop for High School Students
Lower Concert Band Festival		March 10-11, 2010	1896	\$7,841.00	Music Festival
Middle Concert Band Festival		March 24-25, 2010	1789	\$5,721.00	Music Festival
Upper Concert Band Festival		Aprıl 8-9, 2010	1365	\$6,146.00	Music Festival
Lower Solo and Ensemble Festival	ıxal	May 01, 2010	150	\$736.00	Individual Music Performance Festival
Middle Solo and Ensemble Festival	tıval	Feb 8, 9, 11, 2010	230	\$911.00	Individual Music Performance Festival
Upper Solo and Ensemble Festival	ıval	March 06, 2010	1178	\$1,996.00	Individual Music Performance Festival
		TOTALS	8399	\$61,993.00	

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East Tennessee School Band and Orchestra Association Board of Directors Supporting Information Form 990EZ, Part IV, Fiscal Year 2009-2010

Officer	Time (Hours) Per Week	Compensation	Benefits
President Joel Denton Ooltewah High School 6123 Mountain View Road Ooltewah, TN 37363	1	\$100/year	O
President-Elect Steve Taylor South-DoyleHigh School 2020 Tipton Station Rd Knoxville, TN 37920	1	\$100/year	0
Past President David Butler Chattanooga School for the Arts a 865 E Third Ave Chattanooga, TN 37403	1 and Sciences	\$100/year	0
Secretary Megan Christian Bearden High School 8352 Kingston Pike Knoxville, TN 37919	1	\$100/year	0
Band Chairman George W. Hayden III Maryville Intermediate School 835 Montgomery Lane Maryville, TN 37803	2	\$100/year	0
Orchestra Chairman Melissa Hathorn Maryville Intermediate School 835 Montgomery Lane Maryville. TN 37803	1	\$100/year	0
Jazz Chairman Mike Thomas Morristown West High School One Trojan Trail Morristown, TN 37813	1	\$100/year	0
College Representative Christian Zembower East Tennessee State University P O Box 70661 Johnson City, TN 37614	1	\$100/year	0

East Tennessee School Band and Orchestra Association Board of Directors Supporting Information Form 990EZ, Part IV, Fiscal Year 2009-2010

<u>:</u> :

Area Representatives Brooke Rhea Greeneville High School 210 Tusculum Blvd Greeneville, TN 37745	1	\$100/year	0
Matt McCurry Carter High School 210 Carter School Road Strawberry Plains, TN 37871	1	\$100/year	0
Jim Burton Cleveland High School 850 Raider Drive Cleveland, TN 37312	1	\$100/year	0
Executive Secretary-Treasurer Peter M Hodges 108 Alpine Circle Greeneville, TN 37743	10	\$4630/year 5,830	0
Webmaster David A Price Tusculum College PO Box 5040 Greeneville, TN 37743	2	\$1200/year	0