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Form **990-EZ**

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-1150

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Do not enter Social Security numbers on this form as it may be made public.
- ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A For the 2013 calendar year, or tax year beginning , 2013, and ending , 20

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization: **Tennessee's 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 province, country, and ZIP or foreign postal code
Knoxville, TN 37901

D Employer identification number: **62-1535136**

E Telephone number

F Group Exemption Number ▶

G Accounting Method: ☒ Cash ☐ Accrual Other (specify) ▶

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

I Website: ▶

J Tax-exempt status (check only one) - ☐ 501(c)(3) ☒ 501(c) (7) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

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, column (B) below) are \$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)

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

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	63,101
4	Investment income	4	4,183
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	Gaming and fundraising events		
a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b	Gross income from fundraising events (not including \$ 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	21,175
c	Less: direct expenses from gaming and fundraising events	6c	19,698
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	1,477
7a	Gross sales of inventory, less returns and allowances	7a	4,334
b	Less: cost of goods sold	7b	3,189
c	Gross profit on (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	1,145
8	Other revenue (describe in Schedule O)	8	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	69,906
10	Grants and similar amounts paid (list in Schedule O)	10	2,500
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	10,000
16	Other expenses (describe in Schedule O)	16	9,868
17	Total expenses. Add lines 10 through 16	17	32,236
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	37,670
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	254,210
20	Other changes in net assets or fund balances (explain in Schedule O)	20	
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	291,880

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 10642I

Form **990-EZ** (2013)

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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	254,210	22 291,880
23	Land and buildings		23
24	Other assets (describe in Schedule O)		24
25	Total assets	254,210	25 291,880
26	Total liabilities (describe in Schedule O)		26
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	254,210	27 291,880

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 Attached

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. 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	See Attached		
	(Grants \$) If this amount includes foreign grants, check here ► ☐	28a	2,070
29	See Attached		
	(Grants \$) If this amount includes foreign grants, check here ► ☐	29a	17,627
30			
	(Grants \$) If this amount includes foreign grants, check here ► ☐	30a	
31	Other program services (describe in Schedule O)		
	(Grants \$) If this amount includes foreign grants, check here ► ☐	31a	
32	Total program service expenses (add lines 28a through 31a) ►	32	29,563

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 ☐

[illegible]

Part V Other Information (Note the Schedule A and personal benefit contract 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 significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	☒
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)	34	☒
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a ☒	
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b ☒	
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	☒
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	36	☒
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?	37b	☒
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?	38a	☒
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b N/A	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a N/A	
b Gross receipts, included on line 9, for public use of club facilities	39b N/A	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A		
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	40b	☒
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	40e	☒
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 ▶ Zibbie Karen Telephone no. ▶ 865-974-9054 Located at ▶ 230 Thompson Boling Arena, 1600 Philip Fulmer Way, Knoxville, TN ZIP + 4 ▶ 37966		
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: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .	42b	☒
c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ▶	42c	☒
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		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	☒
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	44b	☒
c Did the organization receive any payments for indoor tanning services during the year?	44c	☒
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	44d	☒
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	☒
45b 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)	45b	☒

- 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

	Yes	No
46		☒

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations 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 ☐

- 47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

	Yes	No
47		☒

- 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		☒
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- 49a Did the organization make any transfers to an exempt non-charitable related organization?

49a		☒
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- b If "Yes," was the related organization a section 527 organization?

49b		☒
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- 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 title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

- 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 business address of each independent contractor	(b) Type of service	(c) Compensation

- 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

Condredge Holloway

Type or print name and title

Date

Paid Preparer Use Only

Print/Type preparer's name

Patrick Reid

Preparer's signature

Date

6/8/14

Check ☒ if self-employed

PTIN

379-68-2830

Firm's name ▶ Patrick Reid

Firm's EIN ▶

Firm's address ▶ 1106 Eastwood Ave SE, Grand Rapids, MI 49506

Phone no

616-717-3054

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

▶ ☒ Yes ☐ No

Form **8868**

(Rev. January 2014)

Department of the Treasury
Internal Revenue Service**Application for Extension of Time To File an
Exempt Organization Return**

OMB No. 1545-1709

► File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ ►• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐ ►

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. <u>TENNESSEE'S LETTERMEN'S T CLUB</u>	Employer identification number (EIN) or <u>62-1535136</u>
	Number, street, and room or suite no. If a P.O. box, see instructions. <u>P.O. Box 47</u>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <u>KNOXVILLE TN 37901</u>	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of ► ZIBBIE KARENTelephone No. ► 865-974-9054 Fax No. ► _____• If the organization does not have an office or place of business in the United States, check this box ☐ ►• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until August 15, 20 14, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☒ calendar year 20 2013 or

► ☐ tax year beginning _____, 20 _____, and ending _____, 20 _____.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
- ☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ <u>X</u>

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Tennessee Lettermens T Club
62-1535136
December 31, 2013

Form 990 EZ - Part III

Line 28a

An annual Golf Tournament was held in the spring of 2013 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 \$2,070

Line 29a

The Tennessee Lettermen's T Club held an annual reunion in 2013. 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 \$ 17,627

Tennessee Lettermens T Club
62-1535136
December 31, 2013

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.

December 31, 2013

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
Chris Wampler P.O. Box 47 Knoxville, TN 37901	Past President < 5 hrs	\$0.00	\$0.00	\$0.00
Lisa Reagan P.O. Box Knoxville, TN 37901	President < 5 hrs	\$0.00	\$0.00	\$0.00
Robbie Franklin 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
Lynne Collins Canan 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
Ron McCartney P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Taylor Rotella P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Tom Johnson P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Charlie Severance P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Jerry Holloway P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Jani Trupovnieks P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00

Nate Sumpter 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
Coppley Vickers P.O. Box 47 Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00
Anthony Hancock 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 Tipton Wiles P.O. Box Knoxville, TN 37901	Director < 5 hrs	\$0.00	\$0.00	\$0.00