Form **990**

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)

2008

Open to Public Inspection

X Yes

Form 990 (2008)

☐ No_

Department of the Treasury

► The organization may have to use a copy of this return to satisfy state reporting requirements

	-			, , , , , , , , , , , , , , , , , , , 	- mopodition					
<u>A</u>	or th	e 2008 calendar year, or tax year beginning and e	ending							
B	heck if pplicab	use IRS		D Employer identific	cation number					
	Addre	label or print or SCARRITT-BENNETT CENTER]						
	Name	type								
F	Initial	O No de la contraction D O Nove de contraction and dels contractions de la contraction de la contracti	Room/suite	T	476818					
$\overline{}$	Termi	10		(615) <u>34</u> 0-7500					
F	Amen	ided tions Cturantown state or country and 7ID . 4		G Gross receipts \$	11,099,973.					
F	Applic				I(a) Is this a group return					
	pend			for affiliates?	Yes X No					
		SAME AS C ABOVE		H(b) Are all affiliates inc						
1 7	2Y-6Y	empt status X 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527		1 ' '	list (see instructions)					
_		te: NWW.SCARRITTBENNETT.ORG		H(c) Group exemption						
		organization: X Corporation	1 Voar		State of legal domicile: TN					
	rt I	Summary	IL ICAI	Orioniation. 1723 IV	i State of legal duffilline. 114					
		Briefly describe the organization's mission or most significant activities THE C	משתושי	TC A CONFE	PENCE					
Governance		RETREAT AND EDUCATION CENTER RELATED TO T								
nar										
Ver		Check this box I if the organization discontinued its operations or disposi	ed of more	1 1						
ĝ	l	Number of voting members of the governing body (Part VI, line 1a)		3	23					
≪5	l	Number of independent voting members of the governing body (Part VI, line 1b)		4	22					
Activities &		Total number of employees (Part V, line 2a)		5	35					
Ęï		Total number of volunteers (estimate if necessary)		6	50					
Ac		Total gross unrelated business revenue from Part VIII, line 12, column (C)		<u>7a</u>	235,175.					
	b	Net unrelated business taxable income from Form 990-T, line 34		7b	<u><11,560.</u> >					
	_			Prior Year	Current Year					
ne		Contributions and grants (Part VIII, line 1h)	-	368,370.	229,284.					
Jen (Program service revenue (Part VIII, line 2g)	-	2,094,703.	2,003,141.					
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	ļ	1,592,230.	<u><1,311,598.</u> >					
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	ļ	43,976.	<u>18,904.</u>					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,099,279.	939,731.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)								
	14	Benefits paid to or for members (Part IX, column (A), line 4)								
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,381,498.	1,162,735.					
Expenses	16 a	Professional fundraising fees (Part IX, column (A), line 11e)								
- dx	b	Total fundraising expenses (Part IX, column (D) line 25 137, 77	11.							
ш	17	Other expenses (Part IX, column (A), lines 11a, 11d, 11f2an CENSO		1,874,251.	<u>2,030,927.</u>					
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		3,255,749.	3,193,662.					
	19	Revenue less expenses Subtract line 18 from 12 02 0		843,530.	<2,253,931.>					
or		Total expenses Add lines 13-17 (must equal Fart IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 CT . 2 3 2009		Beginning of Year	End of Year					
Net Assets or Fund Balances		Total assets (Part X, line 16)		16,611,233.	11,445,093.					
ABB	21	Total liabilities (Part X, line 26)		823,655.	705,885.					
F	22	Net assets or fund balances Subtract line 21 from line 20		15,787,578.	10,739,208.					
Pa	rt II	Signature Block								
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and and complete declaration of preparer (opter than officer) is based on all information of which preparer has an	statements, a	and to the best of my knowledg	e and belief, it is true, correct,					
		and complete declaration of preparer (other than officer) is based on all intorpolation of which preparer has an	iy knowleage							
Sigr	,	W. H. Mara Mara		10.1	9.09					
Her		Signature of officer		Date						
	•	Rev. H. Sharon Howell PERSIDENT								
	1	Type or print name and title								
		Preparer's Date	Che		r's identifying number					
Paid		signature DAVID P. DEMARCO, CPA 10/19	l self		tructions)					
Prep	arer's	Firm's name (or RVRD DROCTOR & MILI.C D C	ااات <u>الا</u> لى ر	EIN >						
Use	Only	yours if BIRD, PROCTOR & MILLS, P.C. 214 OVERLOOK CIRCLE, SUITE 250		LIN P						
	j	address, and		Dhora as N / /	C15\467 7200					
		ZIP+4 BRENTWOOD, TN 37027		Pilone no. ► (t	<u> 615)467-7300 </u>					

May the IRS discuss this return with the preparer shown above? (see instructions)

Form **990** (2008)

62-0476818

		$\neg \neg$		
	le the average atom decembed in exertion 501/o/(2) or 4047/o/(1) (other than a nativistic foundation)?		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		х	
_	If "Yes," complete Schedule A	2	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		х
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
4	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	-		
5	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
c	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
6	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space.			- 11
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0	Schedule D, Part III	8	х	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide		- 11	
•	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
• •	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Х	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the US?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		<u> </u>
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		_X_
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		<u> </u>
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<u> </u>
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K	04-		v
	If "No", go to question 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		
C	any tax-exempt bonds?	24c		
ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	270		
LJa		, ,		v
h		25a		Λ.
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
	disqualified person during the year? If "Yes," complete Schedule L, Part I Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
26	disqualified person during the year? If "Yes," complete Schedule L, Part I Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25a 25b		х
26	disqualified person during the year? If "Yes," complete Schedule L, Part I Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	25b		х

Form 990 (2008) SCARRITT-BENNETT CENTER
Part IV Checklist of Required Schedules (continued)

	•		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			i
	If "Yes," complete Schedule N, Part I	_31_		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			ļ
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х

Form **990** (2008)

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4	Takes the purpher reported in Day 2 of Farms 1000. As a sel Currence and Transmitted of		Yes	No				
та	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.							
	Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
С		4	X					
0-	(gambling) winnings to prize winners?	_1c_						
za	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 35							
_	, , ,	2b	х					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	20						
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	20	х					
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? If "Yes " has it filed a Form 900 T for this year? If "No " grounds an explanation in School II O	_ <u>3a</u> 3b	X					
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	30						
44	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)?	4a		х				
h	If "Yes," enter the name of the foreign country	40						
b	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and							
	Financial Accounts							
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	00						
·	Tax Shelter Transaction?	5c						
6a	Did the organization solicit any contributions that were not tax deductible?	6a		X				
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization provide goods or services in exchange for any guid pro quo contribution of more than \$75?	7a	:	Х				
	o If "Yes," did the organization notify the donor of the value of the goods or services provided?							
С	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?	7c		Х				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d							
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal							
	benefit contract?	7e		X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X				
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>						
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h						
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)							
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have							
	excess business holdings at any time during the year?	8						
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.							
	Did the organization make any taxable distributions under section 4966?	9a						
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter: N/A							
а	Initiation fees and capital contributions included on Part VIII, line 12							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter. N/A							
	Gross income from members or shareholders 11a							
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
4.5	amounts due or received from them)							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b							

Form 990 (2008) SCARRITT-BENNETT CENTER 62-0476818 Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O See instructions			
1a	Enter the number of voting members of the governing body 1a 23			
b	Enter the number of voting members that are independent 22			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		_X_
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	ı		
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
_	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	- 02		
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10		х
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
••	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		х
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
_	to conflicts?	12b		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
Ū	in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision.			
_	The organization's CEO, Executive Director, or top management official?	15a	x	
h	Other officers or key employees of the organization?	15b	X	
b	Describe the process in Schedule O (see instructions)	100	- 41	
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
iva	taxable entity during the year?	16a		Х
L	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	iva		
D				
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	4Ch		
500	exempt status with respect to such arrangements? tion C. Disclosure	16b		
17	List the states with which a copy of this Form 990 is required to be filed TN	for		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	IOI		
	public inspection. Indicate how you make these available. Check all that apply			
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, are	id fina	ncial	
	statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ion 🕨		
	<u>JOANN HUTCHISON - (615) 340-7482</u>			
	1008 19TH AVENUE SOUTH, NASHVILLE, TN 37212			

Part VII Gompensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J 2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did not c		ny of	ffice			or, tr	uste	ee, or key employee	r	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	١.		Pos				Reportable	Reportable	Estimated
	hours	(C	hec	k all	that	hat apply)		compensation	compensation	amount of
	per week	ector						from the	from related organizations	other compensation
	Week	or dir	يوا	1	}	ated		organization	(W-2/1099-MISC)	from the
		ustee	trust		æ	bens		(W·2/1099·MISC)	,	organization
		lual tr	tional		yoldr	it con				and related
		Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	e e			organizations
INELLE BAGWELL		 - -	_	Ĭ	 - -	1				
VICE CHAIR	0.00	$ _{\mathbf{x}}$						0.	0.	0.
JANE A. BUCHER										
DEVELOPMENT CHAIR	_ 0.00	x					İ	0.	0.	0.
JOYCE CLARK										
DIRECTOR	0.00	X						0.	0.	0.
KEITH COLE										
DIRECTOR	0.00	X				<u> </u>		0.	`_O.	0.
CAROLYN DRIVER										
DIRECTOR	0.00	X	ļ			_		0.	0.	0.
NADINE HARDIN-MILLER										
DIRECTOR	0.00	X	ļ			ļ		0.	0.	0.
CAROLYN JOHNSON										
BUILDING & GROUNDS CHAIR	0.00	X	ļ	<u> </u>	<u></u>	ļ	ļ	0.	0.	0.
CLAUDIA HIGHBAUGH									_	_
DIRECTOR	0.00	X	ļ.,		<u> </u>	ļ	ļ	0.	0.	0.
MARY DECKER	0 00									•
DIRECTOR	0.00	X						0.	0.	0.
MARY GRACE LYMAN DIRECTOR	0 00	.								0
KEN LUTGEN	0.00		-					0.	0.	0.
TREASURER & FINANCE CHAI	0.00	v						0.	0.	0
NORMA TAYLOR MITCHELL	0.00	^						U •	0.	0.
DIRECTOR	0.00	v						0.	0.	0.
NEDRA OYEN	0.00	Λ	_					0.	0.	<u>U•</u>
DIRECTOR	0.00	x						0.	0.	0.
DELTON PICKERING									- 0.	
SECRETARY	0.00	$ _{\mathbf{x}}$						0.	0.	0.
KEN RAMSEY										
ALUMNI/AE	0.00	\mathbf{x}						0.	0.	0.
ANN RESKOVAC										
CHAIR	0.00	Х						0.	0.	0.
HARRIET OLSON										
EX-OFFICIO	0.00	X						0.	0.	_0.
										C 000 (0000)

(A) Name and title	(B) Average hours	(c		Pos		n app	ıly)	(D) Reportable compensation	(E) Reportable compensation		(F) Estimate amount	
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)		other compensa from th organizat and relat organizat	ation ne tion ted
ROBERT C. WALKER NOMINATIONS/GOVERNANCE C	0.00	X						0.				
N. LYNNE WESTFIELD	0.00	^				\vdash	-	0.	0	┿		0.
DIRECTOR	0.00	х						0.	0			0.
PATIENCE WHITWORTH												
DIRECTOR	0.00	X	ļ					0.	0	•		0.
JERRY RUTH WILLIAMS	0 00				l							_
DIRECTOR REV. H. SHARON HOWELL	0.00	X			<u> </u>			0.	0	+		0.
PRESIDENT, EX-OFFICIO	40.00	v		x		x		68,084.	0			0.
CHERYL TRENT	40.00	^	_	Δ.		^		00,004.		+		
EX-OFFICIO	0.00	X						0.	0	+		0.
1b Total								68,084.	0	-		0.
Total number of individuals (including those	ın 1a) who re	ceiv	ed m	nore	tha	n \$1	00,6	000 in reportable	_			•
compensation from the organization										_	Yes	0 No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for si		stee	, key	y em	plo	yee,	or h	nighest compensated em	ployee on		3	х
4 For any individual listed on line 1a, is the su		le co	mpe	ensa	ation	and	oti	her compensation from t	he organization	F	-	
and related organizations greater than \$150									J	L	4	X
5 Did any person listed on line 1a receive or a	ccrue comper	nsatı	on f	rom	any	unr	elat	ed organization for service	ces rendered to			
the organization? If "Yes," complete Schedu	ule J for such	<u>oers</u>	on							丄	5	X
Section B. Independent Contractors Complete this table for your five highest contractors	mpensated inc	depe	ende	nt c	ontr	acto	rs t	hat received more than \$	\$100,000 of compen	sat	tion from	
the organization (A)							1	(B)			(C)	
Name and business	address							Description of se	ervices	Со	mpensatio	n
COMPASS INTERNATIONAL							T					
, NASHVILLE, TN							_ (CATERING			327,0	<u>09.</u>
2 Total number of independent contractors (in from the organization ▶	ncluding those	ın 1) wh	no re	ecen	/ed r	nor	e than \$100,000 in comp	pensation	 F	orm 990 (2	2008)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must compl			(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members		···		
5	Compensation of current officers, directors,				
	trustees, and key employees	68,084.		68,084.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	819,500.	586,581.	146,557.	86,362.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	215,619.	144,401.	50,765.	20,453.
10	Payroll taxes	59,532.	44,777.	8,960.	5,795.
11	Fees for services (non-employees)				
а	Management	30,473.	30,473.		<u> </u>
b	Legal	37,548.		37,548.	
С	Accounting	43,494.		43,494.	
d	Lobbying	··· =			
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees			-	
g	Other	767,156.	736,297.	30,859.	
12	Advertising and promotion	42,705.	42,705.		
13	Office expenses	168,533.	59,023.	94,819.	14,691.
14	Information technology	10,009.	10,009.		
15	Royalties				
16	Occupancy	427,778.	426,793.	985.	
17	Travel	19,883.	3,247.	16,017.	619.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	22,949.	22,599.		350.
20	Interest	12,119.		12,119.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	131,878.		131,878.	
23	Insurance .	112,225.		112,225.	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	LICENSE FEES AND TAXES	80,896.		80,896.	
b	FOOD/MEALS EXPENSE	75,116.	75,116.		
С	OTHER EXPENSES	27,461.	27,461.		
d	OTHER EXPENSES	11,203.		11,203.	
е	ALUMNI EXPENSES	8,647.			8,647.
f	All other expenses	854.			854.
25	Total functional expenses. Add lines 1 through 24f	3,193,662.	2,209,482.	846,409.	137,771.
26	Joint Costs. Check here ▶ ☐ If following				
-	SOP 98-2. Complete this line only if the organization	İ			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	educational campaign and fundraising solicitation				Form 990 (200

		(2008) SCARRITT-BENNETT CENTER	62-0476818 Page 1							
Ра	rt X	Balance Sheet	T (A)	(m)						
	•		(A) Beginning of year	(B) End of year						
	1	Cash · non-interest bearing	45,795. 1	12,417						
	2	Savings and temporary cash investments	2	12,41						
	3	Pledges and grants receivable, net	3,490,361. 3	1,768,708						
	4	Accounts receivable, net	317,163. 4	255,479						
	5	Receivables from current and former officers, directors, trustees, key	32.,233.	200/2/3						
		employees, or other related parties. Complete Part II of Schedule L.	5							
	6	Receivables from other disqualified persons (as defined under section								
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete								
		Part II of Schedule L	6							
ş	7	Notes and loans receivable, net	7							
Assets	8	Inventories for sale or use	8							
⋖	9	Prepaid expenses and deferred charges	7,039. 9	5,279						
	10a	Land, buildings, and equipment cost basis 10a 3,163,188.								
	b	Less accumulated depreciation Complete								
		Part VI of Schedule D 10b 899,878.	2,382,994. 10c	2,263,310						
	11	Investments · publicly traded securities	9,981,223. 11	6,798,255						
	12	Investments - other securities See Part IV, line 11	12							
	13	Investments - program-related See Part IV, line 11	13							
	14	Intangible assets	306 650 45	241 645						
	15	Other assets See Part IV, line 11	386,658. 15 16,611,233. 16	341,645. 11,445,093.						
	16 17	Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses	16,611,233. 16 304,425. 17	290,969						
	18	Grants payable	18	230,303						
	19	Deferred revenue	19							
	20	Tax-exempt bond liabilities	20							
Ś	21	Escrow account liability Complete Part IV of Schedule D	21							
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,								
iabi		highest compensated employees, and disqualified persons. Complete Part II								
		of Schedule L	22							
	23	Secured mortgages and notes payable to unrelated third parties	226,690. 23	157,801.						
	24	Unsecured notes and loans payable	24							
	25	Other liabilities Complete Part X of Schedule D	292,540. 25	257,115						
	26	Total liabilities. Add lines 17 through 25	823,655. 26	705,885						
		Organizations that follow SFAS 117, check here X and complete								
ces		lines 27 through 29, and lines 33 and 34.	6 774 642 -	2 760 461						
lan	27	Unrestricted net assets	6,774,642. 27	3,769,461.						
Net Assets or Fund Balances	28 29	Temporarily restricted net assets Permanently restricted net assets	4,657,452. 28 4,355,484. 29	2,657,480. 4,312,267.						
Ē	29	Organizations that do not follow SFAS 117, check here	4,333,404. 29	4,512,207						
ř		complete lines 30 through 34.								
ts (30	Capital stock or trust principal, or current funds	30							
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund	31							
¥ A	32	Retained earnings, endowment, accumulated income, or other funds	32							
ž	33	Total net assets or fund balances	15,787,578. 33	10,739,208.						
	34	Total liabilities and net assets/fund balances	16,611,233. 34	11,445,093.						
Pa	rt XI	Financial Statements and Reporting								
			_	Yes No						
1	Acco	ounting method used to prepare the Form 990 $$	Other							
		the organization's financial statements compiled or reviewed by an independent	accountant?	2a X						
		the organization's financial statements audited by an independent accountant?		2b X						
С		es" to lines 2a or 2b, does the organization have a committee that assumes respon		1 1						
_		w, or compilation of its financial statements and selection of an independent acco		2c X						
За		As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit								
L		and OMB Circular A-133?		3a X						
<u>D</u>	<u> 11 T E</u>	es," did the organization undergo the required audit or audits?		3b						

SCHEDULE A

(Form 990 dr 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Internal Revenue Service Inspection Name of the organization Employer identification number 62-0476818 SCARRITT-BENNETT CENTER 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 (Please check only one organization) 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). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 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). 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) 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 the Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4), (see instructions) 10 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 Type II c Type III · Functionally integrated d ____ Type III - Other 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) 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 q Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Y<u>es</u> 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? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the organizations the organization supports. h (iii) Type of (iv) Is the organization (v) Did you notify the (vi) is the organization in col. (i) Name of supported (ii) EIN (vii) Amount of organization in col. (i) listed in your organization in col. (i) organized in the U.S.? organization support (described on lines 1-9 governing document? (i) of your support? above or IRC section Yes No No Yes No (see instructions))

Schedule A (Form 990 or 990 EZ) 2008 SCARRITT - BENNETT CENTER 62 - 0476818 Page 2

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)

Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and	-					
	membership fees received (Do not						
	include any "unusual grants ")	475,282.	296,733.	307,509.	368,370.	229,284.	1677178.
2	Tax revenues levied for the organ-				•		
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 - 3	475,282.	296,733.	307,509.	368,370.	229,284.	1677178.
	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						1677178.
	ction B. Total Support					=-	20112101
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 4	475,282.	296,733.	307,509.	368,370.	229,284.	1677178.
8	Gross income from interest,			30,700,0	300,0.00		
•	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	360,419.	166,260.	218 381	162,315.	134 195.	1041570.
q	Net income from unrelated business	300,413.	100,200.	210,301.			1041370.
J	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
10	or loss from the sale of capital					ı	
	assets (Explain in Part IV)	81,167.	43,196.	399,346.	41,835.	6,968.	572,512.
11	Total support. Add lines 7 through 10	01,107.	43,170.	322,340.	±1,000.	0,200.	3291260.
	Gross receipts from related activities,	etc. (see instruction	ne)			12 9	,104,658.
	First five years. If the Form 990 is for	· ·	-	d fourth or fifth to	l V voor as a soction		,104,030.
13	organization, check this box and stop	-	inst, second, triii	u, rourtii, or intii ta	ix year as a section	11 30 1(0)(3)	ightharpoonup
Sec	tion C. Computation of Publ	ic Support Per	rcentage				
	Public support percentage for 2008 (I			olumn (fl)		14	50.96 %
	Public support percentage from 2007		•	0.0.1 (1))		15	54.04 %
	33 1/3% support test - 2008. If the o			n line 13, and line 1	ا 14 ıs 33 1/3% orm	•	
	stop here. The organization qualifies	-		•		,	▶X
b	33 1/3% support test - 2007. If the o		-		line 15 is 33 1/3%	or more, check th	
	and stop here. The organization qual						ightharpoons
17a	10% -facts-and-circumstances test				13, 16a, or 16b. a	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			•	-	ga	▶ □
h	10% -facts-and-circumstances test	ū	•		•	7a. and line 15 is	10% or
-	more, and if the organization meets the	_					
	organization meets the "facts-and-circ				•		▶□
18	Private foundation. If the organization		-	•			s 🕌
	gro roungation. II the organizatio	s.a orioon a i		.,	, -, -, -, -, -, -, -, -, -, -, -, -, -,		200 57) 2000

	tion A. Public Support	Jigailizations	bescribed iii	Section Sosia	(Complete on	ly if you checked the b	ox on line 9 of Part I.
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and	(a) 2004	(b) 2005	(6) 2000	(4) 2001	(e) 2000	(i) i Otai
•	membership fees received (Do not		1				
	include any "unusual grants ")		1				
_	•						
2	Gross receipts from admissions, merchandise sold or services per-		1				
	formed, 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 bus-						
	iness under section 513		-				
4	Tax revenues levied for the organ-]					
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities	1	1				
	furnished by a governmental unit to		İ				i
	the organization without charge						
6	Total. Add lines 1 · 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 1% of the total of lines 9,						
	10c, 11, and 12 for the year or \$5,000						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)					1	
	tion B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	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			1			
_	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,					İ	
	whether or not the business is regularly carried on						
12	Other income Do not include gain						
-	or loss from the sale of capital						
40	assets (Explain in Part IV)		 				
	Total support (Add lines 9, 10c, 11, and 12)		<u> </u>	1.6 11 601-4		504(-)(0)	
14	First five years. If the Form 990 is for	r the organization	's tirst, second, thi	α, tourth, or titth to	ax year as a sect	ion 501(c)(3) organiz	zation,
800	check this box and stop here stion C. Computation of Publ	io Support De	reentage				
						145	
	Public support percentage for 2008 (•	column (i))		15	%
	Public support percentage from 2007				·	16	%
	tion D. Computation of Inves					T 1	
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2008. If the	•					17 is not
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2007. If the	organization did i	not check a box or	line 14 or line 19a	a, and line 16 is n	nore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che		-	•			▶Щ
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see i	nstructions	_
					•	hadula A (Farm 00	0 000 EZ\ 0000

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. OMB No 1545-0047 Open to Public Inspection

Name of the organization

SCARRITT-BENNETT CENTER

Employer identification number

62-0476818 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 3 4 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items. Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

		<u> </u>	CENT	ER				<u>62-04</u>	<u>76818</u>	Page 2	
Pa	rt III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures,	or Othe	r Simil	ar Asse	ts (contin	ued)	
3	.Using the organization's accession and other	records, check any	of the f	ollowing tha	it are a signif	icant use	of its col	lection ite	ms (check	all	
	that apply)										
а	X Public exhibition	d		Loan or exc	hange progr	ams					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	nev further t	he organizat	on's exer	npt purpo	ose in Par	t XIV		
5	During the year, did the organization solicit or	•		•	•						
_	to be sold to raise funds rather than to be ma								Yes	X No	
Pai	t IV Trust, Escrow and Custodial					ered "Yes	to Form	1 990. Par			
	reported an amount on Form 990, Par								,,		
1a	Is the organization an agent, trustee, custodia	an or other intermed	lary for	contribution	s or other as	sets not	ıncluded				
	on Form 990, Part X?										
h	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowina:	table				_	03		
U	Tes, explain the arrangement in rate XIV	and complete the re	alowing	tabic					Amount		
С	Beginning balance						1c		741104111		
q	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1f				
	Did the organization include an amount on Fo	orm 990 Part Y line	212				<u> </u>		Yes	□ No	
	-	Jim 550, i art A, iine	211						7 162	140	
	b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10										
	2 1 2 1 and of the first and of complete in	(a) Current year		rior year	(c) Two yea		(d) Throo	ears back	(e) Four y	oare back	
4	Pogunning of year balance	10395831.	(D) F	nor year	(C) I WO yea	15 Dack	(a) Timee y	rears Dack	(e) rour y	sais Dack	
1a	Beginning of year balance	10333631.									
b	Contributions	<2406395.									
C	Investment earnings or losses	<2400393.	>								
d	Grants or scholarships										
е	Other expenditures for facilities	CAO 517									
	and programs	648,517.									
f	Administrative expenses	7 240 010		···· ·· ·· ··					ļ <u>.</u>		
9		7,340,919.			L						
2	Provide the estimated percentage of the year										
a	Board designated or quasi-endowment	29.74	_%								
b	Permanent endowment ► 70.26	%									
_		6						_			
За	Are there endowment funds not in the posses	ssion of the organiza	ation tha	at are held a	nd administe	ered for th	ne organiz	zation			
	by								I I .	es No	
	(i) unrelated organizations									X	
	(ii) related organizations								3a(ii)	X_	
b	If "Yes" to 3a(ii), are the related organizations								3b		
<u>4</u>	Describe in Part XIV the intended uses of the										
Pai	t VI Investments - Land, Building										
	Description of investment	(a) Cost or of basis (investing		(b) Cost basis	or other (other)	(c) De	epreciatio	n	(d) Book	/alue	
1a	Land			40	2,624.				402	,624.	
	Buildings				0,494.		71,5	78.	1,538		
	Leasehold improvements		·		2,226.	2	30,3			,853.	
	Equipment				2,425.		20,9			,430.	
	Other				5,419.		76,9			,487.	
	. Add lines 1a-1e (Column (d) should equal Fo	rm 990, Part X. colu	mn (B).						2,263		

Schedule D (Form 990) 2008

 (a) Description of security or category (including name of security) 	(b) Book value		nod of valuation of year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
<u> </u>			····
			·
otal (Col (b) should equal Form 990, Part X, col (B) line 12.)	<u> </u>		·
Part VIII Investments - Program Related.	See Form 990, Part X, line		
(a) Description of investment type	(b) Book value		nod of valuation of-year market value
,			· · · · · · · · · · · · · · · · · · ·
			
Total (Col (b) should equal Form 990, Part X, col (B) line 13.)	<u> </u>		
Part IX Other Assets. See Form 990, Part X, lir			(h) Dagle value
(1	a) Description		(b) Book value
		·····	
Total. (Column (b) should equal Form 990, Part X, col (B)	line 15.)		_ _
Part X Other Liabilities. See Form 990, Part X (a) Description of liability	X, line 25.	(b) Amount	
		(b) Ariount	
Federal income taxes			
DEPOSITS		242,115.	
DISC. FOR FUT. INT. IN LIFE	INC. FU	7,000.	
ANNUITY OBLIGATIONS		8,000.	
	-		
Total. (Column (b) should equal Form 990, Part X, col (B)	line 25)	257,115.	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 832053 12-23-08

_	Jule D (Form 990) 2008 SCARRITT-BENNETT CENTER	. Fin-r	aial Ct			62-0	0476818	Page 4
Par		Finan	ciai Sta		าเร		030	721
	Total revenue (Form 990, Part VIII, column (A), line 12)			1				<u>,731.</u>
	Total expenses (Form 990, Part IX, column (A), line 25)			2	<u> </u>		3,193	
	Excess or (deficit) for the year. Subtract line 2 from line 1			3_			<2,253 <1,084	
	Net unrealized gains (losses) on investments			4_	-		<1,709	
_	Donated services and use of facilities			_5_			<1,709	, 010.
-	Investment expenses			6	ļ		-	
	Prior period adjustments			7				
	Other (Describe in Part XIV)			_8_			12 704	420
	Total adjustments (net) Add lines 4-8			9	-		<2,794	
	Excess or (deficit) for the year per financial statements Combine lines 3 and 9 XII Reconciliation of Revenue per Audited Financial Stateme	nts Wi	ith Rev	10 enue r	er R	eturn	<5,048	, 3/0.
	Total revenue, gains, and other support per audited financial statements		idi i i c v	ondo p		1		,085.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12				1			<u>, 003 -</u> .
	Net unrealized gains on investments	2a	-1 N	84,6	21			
	Donated services and use of facilities	2b	<u>\1,0</u>	$\frac{34,0}{78,3}$				
	Recoveries of prior year grants	2c		10,3	4 /•			
	Other (Describe in Part XIV)	2d		15,9	07			
	Add lines 2a through 2d	_ Zu		<u> </u>	<u> </u>	2e	~aan	, 367.:
	Subtract line 2e from line 1					3		, <u>382.</u> , 282.
						3	934	, 202.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 4-1						
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		12,5	<u> </u>			
	Other (Describe in Part XIV)	4b		12,3	21.		-10	EE1 .
-	Add lines 4a and 4b					4c		<u>,551.</u> ; ,731.
	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) Still Reconciliation of Expenses per Audited Financial Statem	ents W	/ith Fxr	enses	ner	5 Retu		, / 31 •
	Total expenses and losses per audited financial statements	CIIIO VI	//C/ L/	, cii300	PCI	1	5,010	285
	Amounts included on line 1 but not on Form 990, Part IX, line 25				- 1	-	3,010	, 203.
	Donated services and use of facilities	2a	1 Ω	00,0	<u></u>	1		
		2b		00,0	00.			
	Prior year adjustments Losses reported on Form 990, Part IX, line 25	20 2c						
	Other (Describe in Part XIV)	2d		4,0	72			
	Add lines 2a through 2d	Zu		4,0	12.	2e	1,804	072
	Subtract line 2e from line 1					3	3,206	
_						3	3,200	<u>, 413.</u>
	Amounts included on Form 990, Part IX, line 25, but not on line 1	4a			-			
	Investment expenses not included on Form 990, Part VIII, line 7b			12,5	<u> </u>			
	Other (Describe in Part XIV)	4b		14,5	21.		-10	CC1 .
-	Add lines 4a and 4b					4c	3,193	, 551.
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) XIV Supplemental Information	-				5	3,193	,004.
omp	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part It XII, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b	II, lines 1	a and 4,	Part IV, I	ınes 11	and 2	2b, Part V, line	4; Part
AR	T III, LINE 1A: THE CENTER'S COLLECTIONS	ARE I	MADE	UP O	F M	ULT:	ICULTURA	AL
RТ	IFACTS AND TRIBAL ART, TRADITIONAL PIECES	, PRI	EHIST	ORIC	AR	TIF	ACTS FRO	MC

NORTH AMERICA AND OTHER ITEMS FROM CULTURES AROUND THE WORLD. THESE ITEMS ARE HELD AND DISPLAYED IN THE CENTER'S VARIOUS FACILITIES FOR EDUCATIONAL AND EXHIBITION PURPOSES. DURING 2000 AND 2001, THE CENTER WAS GIVEN A SIGNIFICANT NUMBER OF COLLECTION ITEMS FROM ANOTHER LOCAL MUSEUM. EACH OF THE ITEMS IS CATALOGED, PRESERVED, AND CARED FOR, AND ACTIVITIES VERIFYING THEIR EXISTENCE AND ASSESSING THEIR CONDITION ARE PERFORMED CONTINUOUSLY.

IN CONFORMITY WITH THE PRACTICE FOLLOWED BY MANY MUSEUMS, HISTORICAL

COLLECTION ITEMS ARE NOT INCLUDED IN THE STATEMENT OF FINANCIAL POSITION.

ALSO, THE VALUE OF COLLECTION ITEMS GIVEN TO THE CENTER IS NOT REFLECTED

AS REVENUE. THE COST OF ALL OBJECTS PURCHASED IS REPORTED IN PROGRAM

EXPENSES.

PART III, LINE 4: THE CENTER'S COLLECTIONS ARE MADE UP OF MULTICULTURAL

ARTIFACTS AND TRIBAL ART, TRADITIONAL PIECES, PREHISTORIC ARTIFACTS FROM

NORTH AMERICA AND OTHER ITEMS FROM CULTURES AROUND THE WORLD. THESE ITEMS

ARE HELD AND DISPLAYED IN THE CENTER'S VARIOUS FACILITIES FOR EDUCATIONAL

AND EXHIBITION PURPOSES.

PART V, LINE 4: THE CENTER INTENDS TO USE ENDOWMENT FUNDS FOR GENERAL OPERATIONS AND SCHOLARSHIPS.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

IN-KIND SUPPORT: 11835.

COST OF GOODS SOLD: 4072.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

RECLASSIFICATION: -12551.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD: 4072.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

RECLASSIFICATION : -12551.

SCHEDULE M (Form 990)

NonCash Contributions

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

2008 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

SCARRITT-BENNETT CENTER

Employer identification number

62-0476818 Types of Property Part I (b) (c) (d) (a) Method of determining Check if Revenues reported on Number of applicable contributions Form 990, Part VIII, line 1g revenues 1 Art · Works of art Art - Historical treasures 2 3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods Cars and other vehicles 6 7 Boats and planes 8 Intellectual property 1 35,456.MARKET VALUE 9 Securities - Publicly traded Х 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous Qualified conservation contribution (historic structures) Qualified conservation contribution (other) 14 Real estate · Residential 15 16 Real estate - Commercial Real estate - Other 17 Collectibles 18 Food inventory 19 Drugs and medical supplies 20 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts X 0.COST (TABLES AND LI) 25 Other > (TRAVEL/MILEAG) X 18 0.COST 26 Other > Х 1 0.COST 27 Other > (FOOD, BEVERAG) 28 Other -Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for Х the entire holding period? 30a b If "Yes," describe the arrangement in Part II Х Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х contributions? 32a

If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

b If "Yes," describe in Part II.

describe in Part II

Schedule M (Form 990) 2008 SCARRITT-BENNETT CENTER	<u>62-0476818</u>	Page 2
Supplemental Information. Complete this part to provide the information required by Pa Also complete this part for any additional information	rt I, lines 30b, 32b, and 33	
SCHEDULE M, LINE 32B: ITEMS SHOWN ON LINES 1,4, AND 25-	-27 WERE	
RECORDED AS REVENUE ON THE AUDITED FINANCIAL STATEMENTS	BUT WERE NOT	
INCLUDED IN TAXABLE REVENUE. THE VALUE HAS BEEN SHOWN (ON SCHEDULE D.	
		
		<u></u> -
		
		

SCHEDULE O

(Form 990) •

832211 12-18-08

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization SCARRITT-BENNETT CENTER Employer identification number 62-0476818

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE CENTER ALSO OFFERS ITS OWN EDUCATION PROGRAMS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ERADICATION OF RACISM, EMPOWERMENT OF WOMEN, EDUCATION OF LAITY, AND
SPIRITUAL FORMATION.
FORM 990, PART VI, SECTION A, LINE 7A: THE WOMEN'S DIVISION OF THE GENERAL
BOARD OF GLOBAL MINISTRIES OF THE UNITED METHODIST CHURCH (THE WOMEN'S
DIVISION) APPOINTED 14 OF THE 24 VOTING DIRECTORS OF SCARRITT-BENNETT
CENTER FOR 2008 AND 2007. BEGINNING IN 2009, THE NUMBER OF DIRECTORS
APPOINTED BY WOMEN'S DIVISION WILL DECREASE TO EIGHT OVER A THREE YEAR
PERIOD.
FORM 990, PART VI, SECTION A, LINE 10: THE PRESIDENT AND CHIEF FINANCIAL
OFFICER REVIEW THE 990 BEFORE IT IS FILED.
FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS OF THE
SCARRITT BENNETT CENTER DECIDES THE COMPENSATION OF THE TOP MANAGMENT
OFFICIAL INDEPENDENTLY OF THE CENTER. THE BOARD DETERMINES COMPENSATION
BASED ON A VARIETY OF FACTORS. COMPENSATION OF OTHER OFFICERS OR KEY
EMPLOYEES IS ESTABLISHED BY THE PRESIDENT AND REVIEWED YEARLY BY THE BOARD.
FORM 990, PART VI, SECTION C, LINE 19: FINANCIAL STATEMENTS OF
SCARRITT-BENNETT CENTER ARE UPLOADED TO THE GIVINGMATTERS WEBSITE AND MADE
AVAILABLE TO THE PUBLIC. AT THIS TIME, THE CENTER IS IN THE PROCESS OF
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

SCHEDULE O

(Form 990) •

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SCARRITT-BENNETT CENTER

Employer identification number 62-0476818

CREATING A CONFLICT OF INTEREST POLICY SO IT CANNOT BE MADE AVAILABLE TO
THE PUBLIC. THE CENTER DOES NOT CURRENTLY MAKE THE GOVERNING DOCUMENTS
AVAILABLE TO THE PUBLIC.
PART XI QUESTION 2C
THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

SCHEDULE R

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

Schedule R (Form 990) 2008 Employer identification number Open to Public Inspection THE UNITED METHODIST Direct controlling Direct controlling 62-0476818 entity entity Ē СНОВСН Public charity status (if section End-of-year assets Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. 170(B)(1)(A) 501(c)(3)) Œ Total income Exempt Code section 9 9 501(C)3 Legal domicile (state or Legal domicile (state or foreign country) foreign country) <u>ග</u> ➤ See separate instructions. JESUS CHRIST AND THE CHURCH NEW YORK LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. FULFILLING THE MISSION OF Primary activity Primary activity <u>@</u> SCARRITT-BENNETT CENTER Identification of Related Tax-Exempt Organizations MINISTRIES OF THE UNITIED METH, CHURCH 475 WOMEN'S DIV, OF THE GEN, BD, OF GLOBAL Identification of Disregarded Entities RIVERSIDE DRIVE, NEW YORK, NY 10115 Name, address, and EIN Name, address, and EIN of related organization of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service (Form 990) Part II Part

Page 2

Part III Identification of Related Organizations Taxable as a Partnership

(A)	(A) (B) (C)	(0)	Q	(E)		(F)	(9)	Œ	8	3
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predominant income (related, investment, unrelated)		Share of total income	Share of end-of-year assets	Disproportionate allocations?	amou 20 of 8 X-1 (Fo	<u> </u>
Part IV Identification of Related Org	Identification of Related Organizations Taxable as a Corporation or Trust	poration or	Trust							
(A) Name, address, and EIN of related organization	N .:	Ē	(B) Primary activity	(C) Legal domicite (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp. S corp, or trust)		(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership

Yes No

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Part V Transactions With Related Organizations

ote. Complete line 1 if any entity is listed in Parts II, III, or IV	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
~	

- a Receipt of (i) interest (ii) annuates (iii) royalties (iv) rent from a controlled entity
 - **b** Gift, grant, or capital contribution to other organization(s)
- c Gift, grant, or capital contribution from other organization(s)
 - d Loans or loan guarantees to or for other organization(s)
 - e Loans or loan guarantees by other organization(s)
- f Sale of assets to other organization(s)
- g Purchase of assets from other organization(s)
 - h Exchange of assets
- i Lease of facilities, equipment, or other assets to other organization(s)
- j Lease of facilities, equipment, or other assets from other organization(s)
- k Performance of services or membership or fundraising solicitations for other organization(s)
- 1 Performance of services or membership or fundraising solicitations by other organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets
- n Sharing of paid employees
- Reimbursement paid to other organization for expenses
- p Reimbursement paid by other organization for expenses
- q Other transfer of cash or property to other organization(s)
- r Other transfer of cash or property from other organization(s)

	Ç
ansaction thresholds	į
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and tran	

(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1) WOMEN'S DIVISION OF THE GENERAL BOARD OF GLOBAL MINISTRIES OF THE UMC	U	45,833.
(2) WOMEN'S DIVISION OF THE GENERAL BOARD OF GLOBAL MINISTRIES OF THE UMC	D	1,800,000.
(3)		
(4)		
(5)		
(9)		

Schedule R (Form 990) 2008

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62-0476818

Page 4

Schedule R (Form 990) 2008 SCARRITT-BENNETT CENTER

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

	(a)		ę	Q	Ĺ	3	419
	a)	2	<u></u>		<u> </u>	5	
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all partners section 501(c)(3) organizations?	Share of end-of- year assets	Dispropor- tionate	amount in box 20	General or managing
		country)	Yes No		Yes No	or schedule K· I (Form 1065)	
							· · · -
		-					
					_		
	-						
							_

Schedule R (Form 990) 2008