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)

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Ā	For th	19 2006 Caleficial year, or tax year beginning	9 JUN 30, 2003	
B	Chack !	Plesse C Name of organization	D Employer identif	ication number
_	Check i applical	Please use USS Benton Hall Corporation COP	Y	
Г	Addi	luse RS Benton Hall Colporation see label or d/b/a Benton Hall Academy		
片		bype. Doing Business As	62-1	1012762
누	icrien initis retur	Number and street (or P.O. box if mail is not delivered to street address) Room.	suite E Telephone numbe	
누	iretur Tgrn	Ispecific 1422 Both Labor Loop Road	(615	i) 791-6467
느	ettor		G Gross receipts \$	938,308.37
느	retur		H(a) Is this a group r	
L		Franklin, TN 37069-6901		Yes X No
	para		706 H(b) Are all affiliates in	
		4424 Decirical Ecop	/ O O FILE / All	ist. (see instructions)
T	Tax-e>	tempt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527	H(c) Group exemption	
J	Nebs	tte: > www.bentonhallacademy.org	Year of formation: 1977	A State of legal demicile TN
K	уре с	forganization: X Corporation Trust Association Other L	Year of tormadon: 13771	Al Orate of toffer destroyer.
P			- of a maissat	e achool.
	1	Summary Briefly describe the organization's mission or most significant activities: Operation	on or a privac	e schoor.
Activities & Governance	ĺ			
2	2	Check this box	more than 25% of its asset	i. 13
3	3	Altember of voting members of the governing body (Part VI, line 1a)		13
3	4	Number of independent voting members of the governing body (Part VI, line 1b)		15
ون دي	5	Total number of employees (Part V. line 2a)		10
:28	<u> </u>	Tetal number of volunteers (estimate if necessary)		0.00
桑	7	Total gross unrelated husiness revenue from Part VIII, line 12, column (C)	78	0.00
₹	, a	Net unrelated business taxable income from Form 990-T, line 34	1D	
	-	The amounted states	Propress	Current Year
_	8	Contributions and grants (Part VIII, line 1h)	79,078.02	83,594.67
Revenue	9	Program service revenue (Part VIII, line 2g)	895,353.90	827,492.75
횾		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,233.57	5,953.37
2	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,537.14	
	11	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	984,202.63	931,307.36
_	12	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	59,817.52	34,746.18
	13	Benefits paid to or for members (Part IX, column (A), line 4)		414 555 46
	14	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	615,217.57	644,737.16
Expenses	15	Salaries, other compensation, simpleyee Serrit X column (A), line 11e)		The second secon
5	168	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 237.93		
3	b	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	233,794.41	201,128.79
_	17	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	908,829.50	880,612.13
	18	Total expenses. Add lines 13-17 (must equal Fart IX, column VY, into 27) Revenue less expenses. Subtract line 18 from line 12	75,373.13	50,695.23
	19	Revenue less expenses. Subtract line 10 from line 12	Beginning of Year	End of Year
55			162,199.02	184,985.96
88		Total assets (Part X, line 16)	205,107.46	171,585.69
45	21	Total liabilities (Part X, line 26)	<42,908.44	13,400.27
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		
Рa	T I	Signature Block Under penalties of perjury, I declare that I have examined this return, including scenaring schedules and stateme and complete. Declaration of preparer (other than officer) is based on all information of which the same has any knowledge.	ints, and to the best of my knowledg	e and belief, it is true, correct,
		Under penalties of perjury, I declare that I have examined this lead on all information of which are any knowle and complete. Declaration of preparer (other than officer) is based on all information of which are also has any knowle	edge.	
		(C) COPT	1	
Sign)		Date	
Here	•	Signature of officer J. Robert McFadden, II, CEO and Headmaste	r	
		Type or print name and title	Check if Preparer	's identifying number ructions)
Paid		Preparer's COPY	Check if Self- employed > X	: Doughay
	arer's	signature	EIN >	
	1	Firm's name (or Business Data Consultants yours!	CIN	
Use (אוווע	self-employed), 201 G111espie Drive, Ste 6201	Shara 52 - 16	15) 943-0128
		address, and Franklin, TN 37067	Prione no. P (O	X Yes No
May	tha IE	S discuss this return with the preparer shown above? (see instructions)		. (A) 165 L 110

Form **990** (2008)

Benton Hall Corporation

if "No", go to question 25 ______

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? o Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease

any tax-exempt bonds?

disqualified person during the year? If "Yes," complete Schedule L, Part I b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a

d Did the organization act as an "on behalf of" Issuer for bonds outstanding at any time during the year?

25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial

contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

d/b/a Benton Hall Academy 62-1012762 Form 990 (2008) Part IV Checklist of Required Schedules Yes No is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X If "Yes," complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X 3 public office? If "Yes," complete Schedule C, Part I 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II ... Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice 8 X on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide X credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV X Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? X 11 If "Yes," complete Schedule D, Parts VI, VII, VII, IX, or X as applicable Did the organization receive an audited financial statement for the year for which it is completing this return that was 12 X prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 13 le the organization a school as described in section 170(b)(1)(A)(ii)? if "Yes," complete Schedule E X 14a Did the organization maintain an office, employees, or agents outside of the U.S.? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundralsing, business, X and program service activities cutside the U.S.? If "Yes," complete Schedule F, Part I 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity 15 X 15 located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals X 18 located outside the United States? If "Yes," complete Schedule F, Part III X 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 X Did the organization report more than \$15,000 on Part Vill, line 9a? If "Yes," complete Schedule G, Part III 19 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X 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 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J 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.

X 25b 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 X 26 person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II

240

24d

25a

Form 990 (2008)

X

X

X

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 34 Was the organization related to any tax-exempt or taxable entity? 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? 36 If "Yes," complete Schedule R, Part V, line 2 37 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 38 If "Yes," complete Schedule R, Part V, line 2	Yes N		
b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV		288	a H in
c 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 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, line 2 34 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 If "Yes," complete Schedule R, Part V, line 2 37 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 38 Jet Non-Complete Schedule R, Part V, line 2	,	1 1	b H
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 601(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	2		c S
1 Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 2 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 3 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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	,		30 Di
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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	2	1 1	31 Di
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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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		32	32 Die
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 38		33	33 Die
Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 If "Yes." complete Schedule R, Part V, line 2	<u> </u>	34	34 W
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	X	35	35 is a
17 100, Compared Control of the control like of the control of the	X	38	38 Se
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	90 (200		37 Dio

Page 5

_	1990 (2008) 17 D/A Benton Harr Hadden, The Statements Regarding Other IRS Filings and Tax Compliance					
Pa	Statements Regarding Other IHS Filings and Tax compliance				Yes	No
	and Transmittal of	1 1		13.30	温度	
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1a	4	c s		
	U.S. Information Returns. Enter -0- if not applicable		0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	eportable gaming			A.S.W.	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and r	oponius is games		10		X
	(gambling) winnings to prize winners?	I I		198		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	2a	15			5
		702	_	2b	31,725,41	X
b	the transfer of the control on line 2a, did the organization file all required federal employment tax returns	1131		and the	2027	0.872.0
	tills and and a la greater than 250 you may be required to e-life this return. (366	ii isu uctions)	ı	3a	*14.14.4	X
3 a	and the base unrelated business gross income of \$1,000 or more during the year covere	a by this rotain		3b		
	If "No " provide an explanation in Scriedule U		····· }		-	
4a	the color day year did the organization have an interest in, or a signature of outer	additionly over, a	- 1	4a		X
	financial account in a foreign country (such as a bank account, securities account, or other intariorate	accounty1			30 00000000000000000000000000000000000	刘昭新
b	If "Yes," enter the name of the foreign country:	Pank and	-			
	If "Yes," enter the name of the loreign country. See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign 8	Jank and				
	mt I-1 A a a cumbo		ľ	5 a	97(1)924(c)1	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	otion?	····	5b		X
		CHOIT		-		
c	It was the question 5a or 5h, did the organization file Form 8886-1, Disclosure by Tax-Exempt Entry	regarding r remailed		5c		
				6a		X
6a	Tax Shelter Transaction? Did the organization solicit any contributions that were not tax deductible?	lons or gifts	·····			
b	Did the organization solicit any contributions that were not tax veries at the contribution of the organization include with every solicitation an express statement that such contributions.	ons or gine	- 1	6b		
	were not tax deductible?	•••••	Į.			特
7	Organizations that may receive deductible contributions under section 170(c).	than \$75?	-	7a		X
а	Organizations that may receive deductible contributions are services in exchange for any quid pro quo contribution of more Did the organization provide goods or services in exchange for any quid pro quo contribution of more		F	7b		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	as required	···· [.	
o	If "Yes," did the organization notify the dollor of this value of tangible personal property for which it was to file Form 8282?		L	7a		X
	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year If "Yes," indicate the number of Forms 8282 filed during the year	7d				
d	If "Yes," indicate the number of Forms 8262 filed during the year. Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersonal	200			
			<u> </u>	7e	_	X
12	directly or indirectly, on a personal belieff Control	ZULI	-	71	_	X
		***************************************		7g	_	X
g	the state of the s	as roquirous	<u>L</u>	7h	2020X20	X
		1011 000(0)(0)	7	4		
8	Section 501(c)(3) and other sponsoring organizations internating detailed by a sponsoring organizations. Did the supporting organization, or a fund maintained by a sponsoring organization.	janization, have	9			
				8	avenus e	-hristata
_	and ather energy organizations maintaining donor advised funds.	7	12.7	1780010		No.
			<u> </u>	9a	\rightarrow	
a	Did the organization make any taxable distributions dilacing distributions dilacing distribution to a donor, donor advisor, or related person?			9b	Suguest K	ne krisere:
	Section 501(c)(7) organizations. Enter: N/A		11			
10	Is the feet and capital contributions included on Part VIII, line 12	10a				
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	- A			200
b	Service 504(a)(42) organizations, Enter: N/A		被			
		11a				
a a	Gross income from members of shareholders Gross income from other sources (Do not net amounts due or paid to other sources against		3			
	to different them	11b		強度	建筑	1
10-	Constant 4047(a)(4) pon-exempt charitable trusts, is the organization filing Form 990 in field of Form.	1041?	5.	2a	1/360: N	対を行う
128	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1/4	(4)	2000/C	000
D	II 166, Cittor and amount of		F	orm 2	90 (2	UUO)

Benton Hall Corporation

d/b/a Benton Hall Academy

Form 990 (2008)

Ab/a Benton Hall Academy

Fart VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	ction A. Governing Body and Management			Yes	No		
000		89		162	HALES		
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,						
	crocesses or changes in Schedule O. See instructions.	L3					
10	Forer the number of voting members of the governing body	38		*			
ь	to the manhors that are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	256	<u> </u>	140.00	X		
-		·· ├≟	2	_	_		
3	and the standard delegate control over management duties customarily performed by or under the direct supervision		.		x		
3		نــا ··	3		Î		
٠.	and the state of the state of the control of the co	••	4		 		
4	Did the execution become aware during the year of a material diversion of the organization's assets.		3		 		
5		2ــا ٠	3				
8	Does the organization have members or stockholders, or other persons who may elect one or more members of the	- 1			x		
		. 7	_		X		
•		. 7	D	NORTH A			
	Are any decisions of the governing body subject to approva by the subject to approve by the subj						
8							
	by the following: The governing body?	. 8		X			
a	The governing body? Each committee with authority to act on behalf of the governing body?	. 8	<u> </u>	X			
		. 9	<u>a</u>		X		
9a	Does the organization have local chapters, branches, or animated in a section of such chapters, affiliates, if "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			- 1			
þ		. 9	b				
	and the state of the except attended to the except attended to the control of the		- [_ }			
10	The state of the s	. 1	아	X			
	and the second of the complete		ľ				
11	Is there any officer, director of trustes, or key employee listed in a carry of the same and addresses in Schedule O	<u>. 1</u>	<u>1 </u>		X		
	organization's mailing address? If "Yes," provide the mailies and address in seven address in seven address in seven address in seven and address in seven addre						
Sec	tion B. Policies			/es	No		
•	Does the organization have a written conflict of interest policy? If "No," go to line 13"	. 12	a	X			
12a	Does the organization have a written conflict of interest policy. In the organization have a written conflict of interests policy. In the organization have a written conflict of interests policy. In the organization have a written conflict of interests policy. In the organization have a written conflict of interests policy. In the organization have a written conflict of interests policy. In the organization have a written conflict of interests policy. In the organization have a written conflict of interests policy. In the organization have a written conflict of interests policy. In the organization have a written conflict of interests policy. In the organization have a written conflict of interests policy. In the organization have a written conflict of interests policy. In the organization have a written conflict of interests policy. In the organization have a written conflict of interests policy. In the organization have a written conflict of interests policy and the organization have a written conflict of interests policy. In the organization have a written conflict of interests policy and the organization have a written conflict of interests policy and the organization have a written conflict of interests policy and the organization have a written and the organization have a writen and the organization have a written and the organization	1		ı			
		. 12	ᆈ	_	X		
	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	1	ľ	ł			
C		. 12	_	_	X		
		_	_	_	X		
13		. 14	3 .	20000	X		
14	Does the organization have a written document retention and decision. Did the process for determining compensation of the following persons include a review and approval by independent						
15	Did the process for determining compensation of the following persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		羅護				
	persons, comparability data, and contemporaliscus substantiation of the organization's CEO, Executive Director, or top management official?	15	<u>a. .</u>	_	<u>X</u>		
a	The organization's CEO, Executive Director, or top management of the organization? Other officers or key employees of the organization?	15	b L		X		
	Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	3	遊戲	蟿			
		16	a		X		
	taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation						
b	If "Yes," has the organization adopted a written policy or procedure requiring are suggested and taken steps to safeguard the organization's						
	If "Yes," has the organization adopted a written policy or processor by the safeguard the organization's in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	16	b				
	in joint venture arrangements under applicable tectors exempt status with respect to such arrangements?						
Sec	tion C. Disclosure None						
17	List the states with which a copy of this Form 990 is required to be filed NONE None None None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available section 6104 requires an organization or organization for the first organizati	e for					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if application), 556, and 566, 566, 566, 566, 566, 566, 566, 566						
	public inspection. Indicate how you make these available. Check all that apply. Another's website X Upon request						
	Own website Another's website X Upon request Conflict of interest policy.	and fir	nanc	ial			
19	Own website Another's website Another's website Can open request. Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and the conflict of interest policy.						
20	Stote the name, physical address, and telephone number of the person who possesses the books and resolute of the person who possesses the books and resolute of the person who possesses the books and resolute of the person who possesses the books and resolute of the person who possesses the books and resolute of the person who possesses the books and resolute of the person who possesses the books and resolute of the person who possesses the books and resolute of the person who possesses the books and resolute of the person who possesses the books and resolute of the person who possesses the books and resolute of the person who possesses the books and resolute of the person who possesses the books and resolute of the person who person the person who person the person who person the person who person the person that the person who person the person that		_				
	$a_{\text{control}} = a_{\text{control}} = a_{\text$						
	2422 Bethlehem Loop Road, Franklin, TN 37069-6901	For	n 99	0 (2	(800		

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

- 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 (A) Name and Title	(B) Average hours		(che	Po ck al	(C) sitio	ก	ply)		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	per week		edatri lengiviliani	Offer	Key employee	Highest company that (1914)	Former		the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Gregory T. Irvin Chairman	5.00	K							0.00	0.00	0.00
Charles H. Miller, AIA Secretary - Treasurer	5.00	X							0.00	0.00	0.00
Elizabeth Hackett Director	5.00	x							0.00	0.00	0.00
Susan P. Dale Director	5.00	x							0.00	0.00	0.00
Jeri Hasselbring Director	5.00	x							0.00	0.00	0.00
Barbara J. Jenkins Director	5.00	x			L	<u> </u>			0.00	0.00	0.00
George M. Johnson Director	5.00	x							0.00	0.00	0.00
Sylvia Matiko Director	5.00	x							0.00	0.00	0.00
Carol Penterman Director	5.00	x							0.00	0.00	0.00
Alison D. Vai Director	5.00	x							0.00	0.00	0.00
Mary L. Van Cleave Director	5.00	x							0.00	0.00	0.00
Leigh Wlliams Director	5.00	X						L	0.00	0.00	0.00
Richard J. Call, Ph.D. Director	5.00	X							0.00	0.00	0.00
J. Robert McFadden, II Headmaster and CEO	50.00	_	x	4	1	\downarrow			74,794.65	0.00	0.00
		+	+	+	$\frac{1}{1}$	\dashv		\vdash			
		+	+	\dagger	\dagger	+		_			

Page 7

62-1012762

Benton Hall Corporation d/b/a Benton Hall Academy

	n 990 (2008) d/b/a Ber	nton Ha	77	A	ca	<u>ae</u>	αy		. O	unne (continued)		
Pa	1 990 (2008) 47 D7 & D6:	istees, Key E	mpl	oye	9 9, 2	ind i	High	108	t Compensated Employ	(E)		(F)
	(A)	(B)	1		-	C)			(D)	Reportable		Estimated
	Name and title	Average	١.			ition			Reportable compensation	compensatio		amount of
		hours	H	nec	K &III	Tial	app	T T	from	from related		other
		per week	odinidual trustoe or director	ŀ	1	ŀ		ı	the	organization		compensation
		""	8	9			7	ŀ	organization	(W-2/1099-MIS	(C)	from the organization
			ğ	nstitutional trustee		8			(W-2/1099-MISC)		İ	and related
			Ī	a	١.	1	2 2	,				organizations
		l	1 2	별	ෂ	galopema key	Highest compensated	퉏			j	
			⊬	┝	├-	┝	┢	┝	<u> </u>			
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							┢		74,794.65	0.	00	0.00
	Total	in Tal Who re	cav	8G N	none.	uiw	n \$1	00,	000 in reportable		_	. 0
2	Total number of individuals (including unose compensation from the organization									• • • • • • • • • • • • • • • • • • • •		Yes No
											45/	
3	Did the organization list any former officer,	director or tru	stee	, ke	y en	ıplo)	/60,	or t	nighest compensated en	nployee on		
3	Did the organization list any former onicer, line 1a? if "Yes," complete Schedule J for st	uch individual	••••	•••••	•••••	•••••	•••••	•••••				
4												1 10
•												
5		ACTIONS ALBOS	ngati	оп т	ш	MUA	'ww	aiar	DO OIGHINGADON IOI DOLL			7
	the organization? if "Yes," complete Schedu	ile J for such j	oers	on .		•••••	•••••	****	• • • • • • • • • • • • • • • • • • • •			
Sec	tion B. Independent Contractors Complete this table for your five highest con	and the	1000			ontr	ecto	ra f	hat received more than	\$100,000 of comp	ensatio	n from
1		mpensated inc	iebe	niue	ait C	CIIL	aou					
	the organization.			_				Т	(B)			(C)
	(A) Name and business	address	•					-	Description of s	ervices	Comp	pensation
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		<u> </u>			_		- 4-		than \$100 000 in comm	rensation	il History	1000000
2	Total number of independent contractors (in	cluding those	in 1) wh	o re	ceiv	ea n	HOTE	2 migni & 100,000 mi com			
	from the organization	0									For	n 990 (2008)

Forn	n 990	(2000)	Delicois					(D)
Pa	rt VI	IL Statement of never			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	t c	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, grant similar amounts not included above the contributions included in lines Total. Add lines 1a-1f	1b 1c 12 1d 1d 1c 1s, and 1f 70 1s-1f:\$,715.00 ,879.67 ,250.00	83,594.67			
Program Service Revenue		Tuition and fee Transportation Athletic Progra	s fees m Reven	900099 900099 900099	1816.007.00	816,007.00 10,040.00 1,445.75	A POST COLUMN	
- Pr	3	All other program service reve Total. Add lines 2a-2f	dividends, intere	est, and	827,492.75 5,953.37			
	4 5	other similar amounts) Income from investment of tax Royalties	k-exempt bond p	proceeds	3,933.37			
	ŀ	Gross Rents Less: rental expenses Rental income or (loss) Net rental income or (loss)		>				
	7 8	a Gross amount from sales of assets other than inventory Less: cost or other basis	(i) Securities	(ii) Other				
9		and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraising	g events (not	>				
Other Revenue		including \$ 12, / 13 contributions reported on line Part IV, line 18	1c). See a	11439.52 6,582.16		4,857.36		
Oth	9	Net income or (loss) from fund Gross income from gaming ac Part IV, line 19	draising events ativities. See a b		4,857.36	Ettermination (France)		
	10	Net income or (loss) from garr a Gross sales of inventory, less and allowances	returns a	410.02		296.15		
	11 :	Net income or (loss) from sale Miscellaneous Revenu Other income an	0	Business Code 900099	The reservoir of the American Section (1)	March Market		
		d All other revenue		Do, and 11e	9,113.06 931,307.36	847,712.69	0.00	0 • 0 0 Form 990 (2008)

Part IX Statement of Functional Expenses

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

Do:	Section 501(c)(3) All other organizations must complete include amounts reported on lines 6b,	(A) Total expenses	Program service	(C) Management and general expenses	(D) Fundraising expenses
7b,	Bb. 9b, and 10b of Part VIII.		expenses	general oxport	
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	04 440 50	34,442.50		
_	the U.S. See Part IV, line 22	34,442.50	34,442.30		AND A SECTION
_	Grants and other assistance to governments,	l			
3	organizations, and individuals outside the U.S.		202 60		
	See Part IV, lines 15 and 16	303.68	303.68		
	Benefits paid to or for members			The state of the s	Shill the said the said the said the
4	Compensation of current officers, directors,	•			•
5	trustees, and key employees				
	trustees, and key employees				
8	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and			140.00	
	persons described in section 4958(c)(3)(B)	541,277.93	381,784.10	159,493.83	
7	Other salaries and wages	<u> </u>			
8	Pension plan contributions (include section 401(k)	12,337.39	8,759.55	3,577.84	
	and section 403(b) employer contributions)	51,122.11	40,897.69	10,224.42	
9	Other employee benefits	39,999.73	28,399.81		
0	Payroli taxes	33,333,13			
1	Fees for services (non-employees):				
a	Management				
b	Local	9,000.00	6,000.00	3,000.00	
_	Accounting	9,000.00	0,000.00		
ų	Labelyton		wasaning and and an and an an an an an an an an an an an an an	SVESTVILLE VALSAVATOR	
-	Professional fundralsing services. See Part IV, line 17				
•	Investment management fees		<u>:</u>		
g	Other	AP1 48		7,051.45	
2 2	Advertising and promotion	7,051.45	10,940.92		
3	Office expenses	16,411.39	2,801.03		
	Information technology	4,201.55	2,001.03		
14	Royalties		CO FOO 79	7,621.20	
15	Occupancy	76,211.98	68,590.78		
8	Travel	1,025.50	1,025.50		
7	Payments of travel or entertainment expenses		•	ľ	•
18	for any federal, state, or local public officials	·			
	for any federal, state, or local public critical	573.22	573.22	,	
9	Conferences, conventions, and meetings	8,557.10	8,557.10		
20	Interest			H43 H0	237.9
21	Payments to affiliates	4,758.55	3,806.84	713.78	
2	Depreciation, depletion, and amortization	10,005.45		1,000.55	
3	Insurance				
24	Other expenses, itemize expenses not covered				
	anove. (Expenses grouped toget 5% of total				
	expenses shown on line 25 below.)	32,032.62	CONTRACTOR OF THE PARTY OF THE	32,032.62	
а	Rad debts and collectio	21,572.41	21,572.41		
h	school program expenses	21,014.94 6 010 00	6,019.92		
0	Outgide gervices	6,019.92	1,627.66	2,079.99	
d	Orber expense	3,707.65	1,027.00		
-					
0			- 25P 45H 24	245,266.59	237.9
f	All other expenses Total functional expenses. Add lines 1 through 24f	880,612.13	635,107.61	445,400.33	
25	Total functional expenses. Aut miles I discognize		-		
26	Joint Costs. Check here If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				200
	educational campaign and fundraising solicitation	المستنبسين والمستنبين			Form 990 (200

Form 990 (2008)

	an A	Dalatice Stieet					(A) Beginning of year		Er	(B) nd of ye	ear
_							140,869.01	1			65.6
	1	Cash - non-interest-bearing					220/002	2			
	2	Savings and temporary cash investments						3			
	3	Pledges and grants receivable, net					5,957.79	4	2	4,1	42.2
	4	Accounts receivable, net		o trictore ke	······				1		
	5	Receivables from current and former officers, di	rector	of Schadula I	y			5			
		employees, or other related parties. Complete F	dofine	d under sect	on			建筑		· 公司 计数	Serve To
	6	Receivables from other disqualified persons (as 4958(f)(1)) and persons described in section 4958	58/6)/3	VB) Complet	A		网络新洲			50	
		Part II of Schedule L					State of the State	6		M. 1	
	_	Notes and loans receivable, net						7			
Assets	7					- 19	1,797.31				18.4
Ass	8	Prepaid expenses and deferred charges Land, buildings, and equipment: cost basis		•••••			7,159.03	9		4,68	86.9
	9 10a	Land, buildings, and equipment: cost basis	10a	206	073	. 21	在制度的原理的影響的		计算分类是		
		Language Interest the Complete									
	"	Part VI of Schedule D	10b	181,	795	. 21	6,415.88	100	2	4,2	78.0
	11	Investments - publicly traded securities		11	1 1	0,49	94.6				
	12	Investments - other securities. See Part IV, line 1	1					12			
	13	Investments - program-related. See Part IV, line			13	_					
	14	Intangible assets						14		20	0.00
	15	Other assets. See Part IV, line 11				}	160 100 00	15	10		35.96
	16	Total assets. Add lines 1 through 15 (must equa	al line S	34)			162,199.02				8.58
	17	Accounts payable and accrued expenses		96,503.53		 	0,40	0.50			
	18	Grants payable	·····	3,264.00	18		<u>·</u>	· ·			
	19	Deferred revenue		3,204.00	20	 					
	20	Tax-exempt bond liabilities	····· }		21	\vdash					
8	21	Escrow account liability. Complete Part IV of Sch	redule	D				明粉原		金数据数	CYCLE TO
Liabilities	22	Payables to current and former officers, directors	s, trusi	tees, key emp	lloyees, to Part I						
dei	1	highest compensated employees, and disqualifie					HAMMAN SANGARAN SANGAR	22	28/9/6/9/6/20/020-energ-	KIEARINESAA	D.11029 No.11-11
_	'	of Schedule L	····	105,339.93	23	8:	1,11	7.11			
	23	Unsecured notes and loans payable	t		24		y.,				
	24	Other liabilities. Complete Part X of Schedule D	•••••	••••••	•••••	r		25			
	25 26	Total liabilities. Add lines 17 through 25				[205,107.46	26	173	L,58	5.69
	20	Organizations that follow SFAS 117, check he	re >	X and c	omplete	9					
ra.		lines 27 through 29, and lines 33 and 34.				7					
Net Assets or Fund Balances	27	Unrestricted net assets				L	<78,690.92	>27			$\frac{7.26}{7.53}$
alar	28	Temporarily restricted net assets				<u>L</u>	35,482.48		35	20	7.53 0.00
Ä		Demonstry restricted net assets					300.00	29	maka Marasakita	30	
Ē		Organizations that do not follow SFAS 117, ch	eck he	ere 🕨 🗀	and	4					
5		complete lines 30 through 34.				4		30	ALCOHOLD IN	Amelia	
ets	30	Capital stock or trust principal, or current funds				├-		31			
SS	31	Paid-in or capital surplus, or land, building, or equ	ipmen	it fund		··· -		32			
et/	32	Retained earnings, endowment, accumulated inc	ome, c	or other funds		··· -	<42,908.44		13	.40	0.27
Z	33	Total net assets or fund balances				⊦	162,199.02				5.96
	34	Total liabilities and net assets/fund balances				···	102,155.02	0.		755	
Pa	t XI	Financial Statements and Reporting								Yes	No
			7 000	sh X Ac	crual		Other			4-0-25 3-0-40	建
1	Accou	unting method used to prepare the Form 990: Lather organization's financial statements compiled o	r revie							-	X
2a	Were	the organization's financial statements compiled to	an inc	lenendent ac	countan	t?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		2b	X	T
b	Were the organization's financial statements audited by an independent accountant? Were the organization's financial statements audited by an independent accountant? If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,										
	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the additional statements and selection of an independent accountant?										
_	review	, or compilation of its linancial statements and se	ts as set forth in the Single	Audi	it						
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?										X
	Act an	d OMB Circular A-1337 ,," did the organization undergo the required audit	or aud	dits?							
b	If "Yes	, aid the organization undergo the required additi							Forr	m 990	(2008)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

2008
Open to Publications

Name of the croanization

Benton Hall Corporation d/b/a Benton Hall Academy

Employer identification number

62-1012762

Reason for Public Charity Status (All organizations must complete this part.) (see instructions) Part la The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 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.) 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) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry cut 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. d Type (ii - Other c Type !!! - Functionally integrated b Type II a Type I 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. No Yes the governing body of the supported organization? 11g(i) 11g(ii) (ii) A family member of a person described in (i) above? (III) A 35% controlled entity of a person described in (I) or (II) above? 11g(iii) Provide the following information about the organizations the organization supports. h (vi) is the organization in col. (i) organized in the U.S.? (v) Did you notify the (vii) Amount of (iii) Type of (iv) is the organization (II) EIN (i) Name of supported organization organization in col. in col. (I) listed in your support (described on lines 1-9 organization governing document? (I) of your support? above or IRC section No (see instructions))

Total

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

12	Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a seci	ion 501	(c)(3)	. ▶⊡
	to the land and again mark		:	
Sec	tion G. Computation of Public Support Percentage	14		
14 15	Public support percentage for 2008 (line 8, column t) divided by Public support percentage from 2007 Schedule A, Part IV-A, line 26f Public support percentage from 2007 Schedule A, Part IV-A, line 26f 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or 32 1/3% supported organization	15 more, 0	check this box and	
16a	33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3%	% or m	ore, check this box	

b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ______ b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

						Page 3
Schedule A (Form 990 or 990 EZ) 2008 Part III Support Schedule for Or	-11	Becerified in	Section 509/s	1(2) (Complete only	if you checked the b	ox on line 9 of Part I.
Part III Support Schedule for Or	ganizations	Described in	28CHOH 2026	-/(-/ (Complete onl)	in you oncomes the s	
Section A. Public Support	4-2 0004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
Calendar year (or fiscal year beginning in)	(a) 2004	(8) 2000	10,2000			
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that		i	1	1		
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-			İ		ļ	
ization's benefit and either paid to		l				
or expended on its behalf						
8 The value of services or facilities				i		
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 · 5						
7a Amounts included on lines 1, 2, and			ļ			
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that average the greater of 1% of the total of lines 9,						
10o, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b		NAME OF TAXABLE PARTY.			116-12-12-12-12-12-12-12-12-12-12-12-12-12-	
Section B. Total Support				4 7 0007	(e) 2008	(f) Total
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2008	(d) 2007	(8) 2008	(1) 1000
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalities and income from similar sources						
b Unrelated business taxable income					·	
(less section 511 taxes) from businesses		<u> </u>	1			
acquired after June 30, 1975						
c Add lines 10a and 10b	·					
12 Other income. Do not include gain or loss from the sale of capital						
eccete (Evolsin in Part IV.)				NAME OF TAXABLE PARTY.		
13 Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for the	he organization	a first, second, thi	rd, fourth, or fifth	tax year as a section	on 501(c)(3) organiz	ation,
			******************			PL
						04
			column (f))		15	% %
 15 Public support percentage for 2008 (IIII) 16 Public support percentage from 2007 S 	chedule A. Pari	IV-A, line 27g			16	
16 Public support percentage non 2007	ment Incom	e Percentage				04

Section C. Computation of Cash and the section (9)	115	
15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	_	9
to a second com 2007 Schedule A. Part IVA, illio 27 9		
The state of the s	17	9
The same see some single state of the same see some see same see some see s	18	9
17 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	33 1/3	3% and line 17 is not
	-otion	>
19a 33 1/3% support tests - 2008. If the organization did not check the box symbol supported organization qualifies as a publicly supported organization qualifies as	cauUII	22 1/294 and
more than 33 1/3%, check this box and stop here. The digarization qualified to a property of the second stop here. The digarization qualified to the second stop here.	CLA ILI	an 33 1/370, and

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

➤ Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

2008

Department of the Treasury Internal Revenue Service

Name of the organization

Benton Hall Corporation d/b/a Benton Hall Academy

Employer identification number

62-1012762

Organization type (chec	k one):
Filers of:	Section:
Form 990 or 990-EZ	Sol(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
•	4947(a)(1) nonexempt charitable trust treated as a private foundation
•	501(c)(3) taxable private foundation
General Rule X For organization	n is covered by the General Rule or a Special Rule . (Note . Only a section 501(c)(7), (8), or (10) organization can check boxes and a Special Rule. See instructions.) In filling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one implete Parts I and II.
509(a)(1)/170(b) amount on For	O1(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections (1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the in 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II. O1(c)(7), (8), or (10) organization filling Form 990, or Form 990-EZ, that received from any one contributor, during the year, or indicated the section of the provention of cruelty to children or animals. Complete Parts I, II, and III.
For a section 50 some contribut \$1,000. (If this l	D1(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, D1(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, D1(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, D1(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, D1(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, D1(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, D1(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, D1(c)(7), (8), or (10) organization filing from 990, or Form 990-EZ, that received from any one contributor, during the year, D1(c)(7), (8), or (10) organization filing from 990, or Form 990-EZ, that received from any one contributor, during the year, D1(c)(7), or (10) organization filing from 990, or Form 990-EZ, that received from any one contributor, during the year, D1(c)(7), or (10) organization filing from 990, or Form 990-EZ, that received from any one contributor, during the year, D1(c)(7), or (10) organization filing from 990, or Form 990-EZ, that received from any one contributor, during the year, D1(c)(7), or (10) organization filing from 990, or form 990-EZ, that received from any one contributor, during the year, D1(c)(7), or (10) organization filing from 990-EZ, that received from any one contributor, during the year, D1(c)(7), or (10) organization filing from 990-EZ, that received from any or (10) organization filing from 990-EZ, that received from 990-EZ, that received from 990-EZ, that received from 990-EZ, that received from 990-EZ, that received from 990-EZ, that received from 990-EZ, that received from 990-EZ, that received fr

Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization

Benton Hall Corporation d/b/a Benton Hall Academy

62-1012762

Employer Identification number

Contributors (see instructions) Part la (d) (c) Type of contribution Aggregate contributions (a) Name, address, and ZIP + 4 No. Person The Ragsdale Family Foundation **Payroll** 1 Noncash 10,000.00 27 Northumberland (Complete Part II if there is a noncash contribution.) Franklin, TN 37069 (d) (c) Type of contribution Aggregate contributions (a) Name, address, and ZIP + 4 No. Person John L. and Mary L. Van Cleave **Payroll** Noncash 8,645.00 1208 Brookview Drive (Complete Part II if there is a noncash contribution.) 37027-8424 Brentwood, TN (c) Type of contribution (b) Aggregate contributions (a) Name, address, and ZIP + 4 No. Person John L. and Mary L. Van Cleave **Payroli** Noncash 3,250.00 1208 Brookview Drive (Complete Part II if there is a noncash contribution.) 37027-8424 Brentwood, TN (c) Type of contribution (b) Aggregate contributions (a) Name, address, and ZIP + 4 No. Person Mr. and Mrs. Al Phillips Pavroll 4 Noncash 10,000.00 Post Office Box 158069 (Complete Part II if there is a noncash contribution.) Nashville, TN 39215 (c) Type of contribution (b) Aggregate contributions (a) Name, address, and ZIP + 4 No. X Person Barbara Jenkins Pavroll 5 Noncash 5,000.00 5057 Kingsview Court (Complete Part II if there is a noncash contribution.) Nashville, TN 37220 (c) Type of contribution (b) Aggregate contributions (a) Name, address, and ZIP + 4 No. M. Stratton Foster Charitable Person Foundation **Payroll** 6 Noncash 12,750.00 401 Bowling Avenue #82 (Complete Part II if there is a noncash contribution.) Schedule B (Form 980, 990-EZ, or 990-PF) (2008) 39205 Nashville, TN

Name of organization

Benton Hall Corporation d/b/a Benton Hall Academy

62-1012762

	(c)	(d)
(b) Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
The Louise B. Wallace Founation 4400 Harding Rd Ste 310 Nashville, TN 39205	\$5,000.00	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(b)	(c)	(d) Type of contribution
Name, address, and ZIP + 4	Aggregate continuations	
A. Warren Phillips, III 20 Burton Hills BOulevard, Suite 312 Nashville, TN 39215	\$6,820.00	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(b)	(c)	(d) Type of contribution
Name, address, and ZIP + 4	\$	Person
(b)	(c) Aggregate contributions	(d) Type of contribution
Name, address, and 21-7-7-	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(b)	(c) Aggregate contributions	(d) Type of contribution
Name, address, and ZIF + 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(b)	(c) Aggregate contributions	(d) Type of contribution
Name, address, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.) 990, 990-EZ, or 990-PF) (2008)
	(b) Name, address, and ZIP+4 The Louise B. Wallace Founation 4400 Harding Rd Ste 310 Nashville, TN 39205 (b) Name, address, and ZIP+4 A. Warren Phillips, III 20 Burton Hills BOulevard, Suite 312 Nashville, TN 39215 (b) Name, address, and ZIP+4 Name, address, and ZIP+4	(a) Aggregate contributions

Schedule B (Form 990, 990-EZ, or 990-PF) (2008) Name of organization Benton Hall Corporation d/b/a Benton Hall Academy

62-1012762

	Benton Hall Academy		
Part II	Noncash Property (see instructions)		
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I	13 used Fujitsu Lifebook laptop		-
3	computers.	ss	08/01/08
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part			
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
		Schedule B (Form 99	0, 990-EZ, or 990-PF) (200

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

Name of the organization

Benton Hall Corporation

d/b/a Benton Hall Academy

Employer identification number 62-1012762

Manna	d/b/a Benton Hall Acad Organizations Maintaining Donor Advised Fun	emy le or Other Similar Fun	ds or Acco	ounts. Complete if the
Part	Organizations Maintaining Donor Advised Fun	da of Oniei Cilimai		
100 miles	organization answered "Yes" to Form 990, Part IV, line 6.	a) Donor advised funds	(b) Fo	inds and other accounts
		a) bono de de de		
	Total number at end of year			
_				
2 .	Aggregate contributions to (county)			
3 4	Aggregate value at end of year	the state of the s	bilead funds	
4 4	Aggregate value at end of year	hat the assets neig in donor au	Mised Idilds	☐ Yes ☐ No
5	Did the organization inform all donors and donor advisors in writing to the organization's property, subject to the organization's exclusive the organization's property, subject to the organization's exclusive	e legal control?	ha read only	
- 1	tre the organization's property, subject to the organization's exclusive the organization inform all grantees, denors, and denor advisors and the organization inform all grantees, denors, and denor or denor	in writing that grant runcs may	adusta besef	Yes No
8	Did the organization inform all grantees, donors, and donor advisors or charitable purposes and not for the benefit of the donor or donor or charitable purposes and not for the benefit of the organization.	advisor or other impermissible	Port IV line	7.
			J, Fat 14, 1116	
Par	A		historically im	nortant land area
1	Purpose(s) of conservation easthern use (e.g., recreation or pleasure Preservation of land for public use (e.g.,	Preservation of an Preservation of ce	riistorically illi	etructure
	Protection of natural habitat	Preservation of Cer	Tuiled Hatorio	
	Procession of onen space		enconvotion a	esement on the last day
_	Protection of open space Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation	contribution in the form of a c	CUSEI VALIOIT	
2	Complete lines 2220 ii ulo digamento			Held at the End of the Year
	of the tax year.			
	Total number of conservation easements	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
a	Total number of conservation easements Total acreage restricted by conservation easements		20	
þ	Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure I	nctuded in (a)	20	
0	Number of conservation easements on a certified historic structure. Number of conservation easements included in (c) acquired after 8/	7/08	the ergenizat	ion during the taxable
d	Number of conservation easements included in (c) acquired after 8/ Number of conservation easements modified, transferred, released, Number of conservation easements modified, transferred, released,	extinguished, or terminated by	Me oldansar	ion defining and terminal
3	Number of Conservation oppositions			•
	year Number of states where property subject to conservation easement	is located	and ·	
4	Number of states where property subject to conservation easement. Does the organization have a written policy regarding the periodic mentorcement of the conservation easements it holds?	enitoring, inspection, violations	s, and	Yes No
8	Does the organization reasonable it holds?			•••••
	enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing inspecting, and enforcing inspecting, and enforcing inspecting.	rcing easements during the year		
. 6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing Amount of expenses incurred in monitoring, inspecting, and enforcing Amount of expenses incurred in monitoring on line 2(d) above satistications.	ig easements during the year	170/b)/A)/(B)/(I)	
	- Annual Control Agentiant reported on the ACT	•		Yes No
8			mee etatemen	t. and baiance sheet and
_	nd section 170(h)(4)(B)(li)? In Part XIV, describe how the organization reports conservation easinclude, if applicable, the text of the footnote to the organization's fi	ements in its revenue and expe	nee the organi	zation's accounting for
	Harbor of the maintain to use organization			_
	Include, il application, disconnente.	IV toward Traceures Of	r Other Sin	nilar Assets.
100	conservation easements. Organizations Maintaining Collections of Art, Organizations Maintaining Collections of Art,	Histolical Heasmest of		
	Complete it the cigalization attended			
			d halance she	et works of art, historical
4.	If the organization elected, as permitted under SFAS 116, not to rep treasures, or other similar assets held for public exhibition, education	ort in its revenue statement an	foublic service	e, provide, in Part XIV, the text of
	the second distriction of the second		alamaa ahaat t	works of sit. Historical houses or
	treasures, or other similar assessments that describes these items. the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116, to report if the organization elected, as permitted under SFAS 116, to report	in its revenue statement and be	vice provide	the following amounts relating to
þ	and the similar assets field for public extinction,			
				_ @
	these items: (i) Revenues included in Form 990, Part VIII, line 1	,,,		> \$
	these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X (iii) Assets included in Form 990, Part X		ncial agin nm	vide
=	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, if the organization received or held works of art, historical treasures.	, or other similar assets for final	Inia Ami hio	
2	to a security required to be reported under or no			
	the following amounts required to be reported under SFAS 116 relatives included in Form 990, Part VIII, line 1			\$
а	Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X			*
b	Assets included in Form 550, 1 a			Schedule D (Form 990) 2008
		-tweetleng for Form 990.		Adioan - 1

10	Benton	Haii Coir	1 7020	OM17			62-10	12/04	Page Z
Schedule D (Form 990) 200 Part III Organization	a d/b/a Be	enton Hal	A. High	rical Tre	asures, or	Other Si	milar Asse	ts (continu	ied)
Part III Organizatio	ons Maintaining C	collections of	Art, Histo	offical fre	are a significa	ent use of its	s collection ite	ems (check	all
Parents organization	ons Maintaining C	r records, check	any of the to	llowing utat	. ale a significa				
3 Using the organization			<u> </u>		ongo program	19			
that apply): a Public exhibition	in.				nange program				
	roh		· —	ther				83 (172.)	
b Scholarly resea	or future generations of the organization's co				!	'a avemnt i	ouroose in Pa	rt XIV.	
c Preservation to	of the organization's Co	ollections and ex	plain how the	ey further th	e organization	oimilar agg	ate.		
									No_
5 During the year, did t	he organization solicit o	aintained as part	of the organ	ization's co	llection?	1 43/22# 40	Form 990 Pa	rt IV. line 9,	or
to be sold to raise fur Part V Trust, Esc	nds rather than to be in	I Arrangemei	nts. Comple	te if organi:	zation answere	ed Yes to	101111 00011 -		
Part IV Trust, Esc	mount on Form 990, Pa	rt X, line 21.				to mak inch	ided		
reported an a	mount on the sustant	lian or other inter	mediary for o	contribution	s or other ass	ets not incid		Yes	☐ No
1a Is the organization ar	agent, trustee, custou								
on Form 990, Part X's b If "Yes," explain the	Bort XIV	and complete th	e following t	able:		Г	$\neg \neg$	Amount	
b If "Yes," explain the	arrangement in Fait Aiv	and somp				-	10		
						 -	10		
 Beginning balance 	year	••••••				 	1d		
d Additions during the	year						10		
ni-tuibudiane during	the year	***************************************					18	Yes	No
f Ending balance		000 Port Y	line 21?				ـــ.ــــــــــــــــــــــــــــــــــ		
a multiple erganization	include an amount on	0		12					
b if "Yes," explain the	arrangement in Part XIV	is a reprize tion ar	nswered "Ye	s" to Form 9	990, Part IV, Iir	ne 10.		. I (a) Four	years hack
Part V Endowme	nt Funds. Complete	(a) Current ye	ar (b) P	rior year	(c) Two years	back (d)	hree years back	((e) roun	中国的国际
ATTENDED TO THE PARTY OF THE PA		(a) Current ye	2000年	建设施的	和影響的影響的	多型 伊东	THE STREET SANS		
1a Beginning of year ba	alance		艾斯斯	2000年1月1日	经营业等的	器數据 機能		THE THEORY OF THE PARTY OF	经和表现V等 A
h Contributions			Waldistr.	建设的总统	PRINCIPLE OF THE	的基础,理图		2. 可可用的数据形式 以 特殊的的现在分	The first the
c Investment earnings	or losses			ne Reserve	化层型加速 槽		PARTY IN THE REAL PROPERTY.	THE SECRETARY OF THE SE	arrana na an
d Grants or scholarsh	lps		225/44/62		Service de la companya del companya de la companya del companya de la companya de				
e Other expenditures	for facilities				国际的	學學是	STATE LAND	A STATE OF THE STA	20年後年本年の1
and programs			ASSESSMENT OF THE PERSON OF TH		100 mm (110 mm)	器湖湖 謝館	1714 5 585		またままりませんからま
A Administrative expe	nses		6年2月1日 6年1日 5年2月1日 6年1日 5年2月1日 6年1日	TO THE STATE OF TH	London Control	ingan ara	S. A. S.	品 拉达比较级	人为自己的
			THE DESIGNATION OF	THE VIEW THE PERSON	DOM: NO SERVICE SERVIC		• •		
g End of year balance	ed percentage of the ye	ear end balance h	neld as:						0
2 Provide the estimated of	r quasi-endowment		%						
	nent D								
c Term endowment] 3a Are there endowme	·	%		-t -u- bold :	and administe	red for the o	organization	-	
C Territ endowment	ent funds not in the poss	session of the org	ganization th	at are new	and duniment				Yes No
3a Are there endowns	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							3a(i)	
by:	nizations				••••••			3a(ii)	
(i) unrelated organ	ationsations							3b	
(ii) related organiza	ations	ns listed as requ	ired on Sche	dule R?					
b if "Yes" to 3a(ii), are	the related organization the intended uses of the	he organization's	endowment	funds.	O Dort V line	10.			
4 Describe in Part XIII	nts - Land, Buildir			ee Form 99	b, Part X, IIIO	(c) Depr	eciation	(d) Book	(value
Part VI Investine	n of investment	(a) Cos	t or other	(b) Cos	st or other s (other)	(0) 50			
Description	101 1114634116115	basis (in	vestment)	Dasis	s (outer)	G Vincento			
	11.000000					学的证明,	174.15.15.200.000.000.000.000		
1a Land									
b Buildings									
c Leasehold improve	ments				0.00	101	795.21	24.	278.00
d Equipment				206	,073.21			24.	278.00
e Other		990 Part)	K. column (B)	, line 10(c).)			Cabodi	ule D (Form	990) 2008
e Other Total. Add lines 1a-1e. (C	Column (d) should equal	FUIII 330, Tart	,				Schage	(1 0.11	to Suturb & #30050

Benton Hall Corporation d/b/a Benton Hall Academy

hedule D (Form 990) 2008 d/b/a Bento	on Hall Acade	12		
art VIII Investments - Other Securities, Se	e Form 990, Part X, 1116	12.	(c) Method of valu	ation:
(a) Description of security or category	(b) Book value		Cost or end-of-year ma	rket value
(including name of security)				
nancial derivatives and other financial products				
psely-held equity interests				
osely-held equity interests				
ner				
				and an experience of the second secon
		经验证证据	新疆型型型的原 <i>制。</i> 但是	的数据的数据的数据
tal. (Col (b) should equal Form 990, Part X, col (B) line 12.)	- and Dark V lin	0.13		
tal. (Col (b) should equal Form 990, Part X, col (b) lille 12.79 Part VIII Investments - Program Related. S	Jed i chiirecty	1	(c) Method of valu	ation:
(a) Description of investment type	(b) Book value	- - (Cost or end-of-year ma	arket value
(a) Description of investment type				
		,		
			4	
		and September 2011 in the September 2011 in		
and (S. J. Ch.) should equal Form 990. Part X. col (B) line 13.)	>			
otal. (Col (b) should equal Form 990, Part X, col (B) line 13.)				(b) Book value
	e 15.			
Part X Other Assets. See Form 330, Fall 1990, (a	i) Description			
Part X Other Assets, See Form 335, Fall 1997 (a	i) Description			
Cart IX Other Assets, See Form 930, Part X, col (B)	i) Description			
otal. (Column (b) should equal Form 990, Part X, col (B)	i) Description			
otal. (Column (b) should equal Form 990, Part X, col (B)	i) Description			
otal. (Column (b) should equal Form 990, Part X, col (B) Part X: Other Liabilities. See Form 990, Part X (a) Description of liability	i) Description			
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otal. (Column (b) should equal Form 990, Part X, col (B) Part X: Other Liabilities. See Form 990, Part X (a) Description of liability	i) Description			
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otal. (Column (b) should equal Form 990, Part X, col (B) Part X: Other Liabilities. See Form 990, Part X (a) Description of liability	i) Description			
otal. (Column (b) should equal Form 990, Part X, col (B)	i) Description			

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

d/b/a Benton Hall Academy Part XIII Reconciliation of Change in Net Assets from Form 990 to Financial Statements 931,307.36 Total revenue (Form 990, Part VIII, column (A), line 12) 880,612.13 Total expenses (Form 990, Part IX, column (A), line 25) 2 50.695.23 Excess or (deficit) for the year. Subtract line 2 from line 1 3 4,169.09 4 Net unrealized gains (losses) on investments 5 Donated services and use of facilities ______ Investment expenses _____ 8 1,444.39 7 Prior period adjustments Other (Describe in Part XIV) 8 5.613.48 9 Total adjustments (net). Add lines 4-8 56,308.71 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 10 Part XIN Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains on investments Donated services and use of facilities a Recoverles of prior year grants 20 d Other (Describe in Part XIV) 2d Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990; Part VIII, line 7b b Other (Describe in Part XIV) 40 o Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.) PartXIIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX, line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d 3 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: b Other (Describe in Part XIV) _______4b 40 e Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.) Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

SCHEDULE E (Form 990 or 990-EZ)

Schools

▶ To be completed by organizations that

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

➤ Attach to Form 990 or Form 990-EZ.

Benton Hall Corporation

Employer identification number 62-1012762

Name of the organization d/b/a Benton Hall Academy YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, X other governing instrument, or in a resolution of its governing body? Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? X 2 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes X the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain 3 X a Records indicating the racial composition of the student body, faculty, and administrative staff? 48 X b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student 40 admissions, programs, and scholarships? X d Copies of all material used by the organization or on its behalf to solicit contributions? 4d If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: X 58 a Students' rights or privileges? X b Admissions policies? X 50 c Employment of faculty or administrative staff? X 5d d Scholarships or other financial assistance? X e Educational policies? X 51 f Use of facilities? X 5g g Athletic programs? X h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) X 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation Schedule E (Form 990 or 990-EZ) 2008 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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

2008

Operate Rubilion
Inspections

Department of the Treasury internal Revenue Service

Name of the organization

Benton Hall Corporation d/b/a Benton Hall Academy

Employer identification number 62-1012762

d/b/a Benton nail Academy
Gostion A. line 10: Form 990 is reveiwed by the Board
form 990, Part VI, Section A, line 10: Form 990 is reveiwed by the Board of Directors at its regularly scheduled meeting prior to filing.
of pirectors at its regularly scheduled meeting prior to the second
deguments, conflict of
Form 990, Part VI, Section C, Line 19: Governing documents, conflict of
Form 990, Part VI, Section C, line 13. contact and examinate to the public interest policy and financial statements are made available to the public
interest policy and financial seasons
upon request.
The fiscal year ended June 30, 2009 is the first year the organization
The figcal year ended June 30, 2009 is the first year the organization
The libert and tor.
has engaged an indepentdent auditor.

Depreciation and Amortization

OMB No. 1545-0172

990 4562 (including information on Listed Property) Sequence No. 67 Attach to your tax return. ➤ See separate instructions. Business or activity to which this form relates Department of the Treasury Internal Revenue Service (99) 62-1012762 Name(s) shown on return Form 990 Page 10 Benton Hall Corporation Part Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 250,000.00 Maximum amount. See the instructions for a higher limit for certain businesses 2 Total cost of section 179 property placed in service (see instructions) 800,000.00 3 3 Threshold cost of section 179 property before reduction in limitation 4 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 5. Dollar limitation for tax year, Subtract line 4 from line 1. If zero or less, enter -0-. If married filling separately, see instructions (b) Cost (business use only) (a) Description of property 8 7 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction. Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disailowed deduction to 2009. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation for qualified property (other than listed property) placed in service during the tax year 14 15 3,127.14 15 Property subject to section 168(f)(1) election Patrilla MACRS Depreciation (Do not include listed property.) (See instructions.) 18 Other depreciation (including ACRS) 17 MACRS deductions for assets placed in service in tax years beginning before 2008

	CRS deductions for assets placed users electing to group any assets placed in ac Section B - Asset (a) Classification of property	(b) Month and year placed in service	nto one or more general esset acc During 2008 Tax Year (c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
a	3-year property						
<u>=</u>	5-year property						
<u>, </u>	7-year property						
3	10-year property						
<u>-</u>	15-year property					60	
-	20-year property			25 yrs.		S/L	
	25-year property			27.5 yrs.	MM	S/L	
<u>g_</u> _		<u>/</u>		27.5 yrs.	MM	S/L	
h	Residential rental property			39 yrs.	MM	S/L	
					MM	S/L	
l	Nonresidential real property	/	During 2008 Tax Year U	Ising the Alterr	ative Depre	clation Sy	estern
	Section C - Asset	s Placed in Service	During 2000 Tax Tom	T		S/L	
				12 yrs.		S/L	
<u>)a</u>	Class life			40 yrs.	MM	S/L	
b_	12-year	1					
C	40-year Summary (See Instructions	3.)				21	
ag	Summary (See Incode from	line 28					
	sted property. Enter amount from total. Add amounts from line 12, line ter here and on the appropriate lines.	MII ''''	nes 19 and 20 in column (g), and ane 21.		22	3,127

816252 11-08-08

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, Form 4582 (2008) Part V

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, ail of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) No 24b if "Yes," is the evidence written? (1) 24a Do you have evidence to support the business/investment use claimed? (h) Elected **(f)** Depreciation deduction (e) section 179 Method (b) Date Basis for depreciation Recovery Business/ investment Convention cost ess/investment Cost or (a) Type of property (list vehicles first) period (busin other basis placed in use only) use percentage 25 Special depreciation allowance for qualified listed property placed in service during the tax year and 25 used more than 50% in a qualified business use..... 28 Property used more than 50% in a qualified business use: % % 27 Property used 60% or less in a qualified business use: S/L· S/L· 96 S/L· % 28 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 29 Add amounts in column (I), line 26. Enter here and on line 7, page 1 Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for

you provided vehicles to your employees, hist allowed ose vehicles.					(0	1	(0)	(€	•	(f	-
	(a Veh	-	(b Vehi		Veh		Veh	icle	Veh	icle	Veh	ICIO_
Total business/investment miles driven during the year (do not include commuting miles)												
Total commuting miles driven during the year Total other personal (noncommuting) miles												
driven					34.0	No	Yes	No	Yes	No	Yes	N
Add lines 30 through 32 Was the vehicle available for personal use	Yes	No	Yes	No	Yes							├-
during officiaty hours?									_			<u> </u>
Was the vehicle used primarily by a more than 5% owner or related person?			 									ŀ
8 is another vehicle available for personal use?							Thek	Employ	888			

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5%

An	swer these questions to determine if you meet all exceptions to	Yes	No
OW	ners or related persons. Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your		
37	Do you maintain a written policy statement trial provided by your		
	employees? except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of the prohibits personal use of vehicles, except community of the prohibits personal use of vehicles, except community of the prohibits personal use of		
38	employees?		
			ļ
39	employees? See the incuted by employees as personal use? Do you treat all use of vehicles by employees as personal use? Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? the use of the vehicles, and retain the information dute information use?		
		4 T. W.	
44	Do you provide more than the various to your provide more than the various to the use of the vehicles, and retain the information received? Do you meet the requirements concerning qualified automobile demonstration use? Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.	म् अस्तिका	STATES SAID
41	Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete decision	(f)	
ΓĒ		rtization	

41 Do you meet the requirements concerning 4- Note: If your answer to 37, 38, 39, 40, or 41 is	"Vee " do not	complete Section B for t	he covered vericles		
Note: If your answer to 37, 38, 39, 40, 01 41 K	100, 001.00			(a)	
Part VE Amertization	46.8	(C)	1-7	Amoritzaficia	Amortization for this year
	Osto amortization	Amortizable amount	Code section	period or percentage	100 000,000
Description of costs	pegins				
42 Amortization of costs that begins during your	2008 tax year:		T		401 11
42 Amortization of costs triat begins 5.			ļ		1,631.41
	+		L	43	
See Statement 1	CCCG toy VOGT				1,631.41
43 Amortization of costs that began before your 44 Total. Add amounts in column (f). See the ins	2000 tax year	hara ta ranort			Form 4562 (2008)
43 Another and an expense in column (f). See the ins	tructions for w	nere to report			Fulli 400m (2000)
44 Total Add amounts at column y					

Benton Hall Corporat	Dat	rt VI - Amortiz	ation		Statement 1
Form 4562		LC VIII	(d)	(e)	(f)
(a)	(b) Date Began	(c) Amortizable Amount	Code Section	Period/ Percent	Amortization this year
Description of Costs Website design and deployment	07/01/08	5,000.00 1,695.14		60M 36M	1,000.00 517.96 13.89
ASAP Software Lotus software Peachtree 2009 Accounting software	08/01/08 08/28/08 10/31/08	50.00 448.00		36M 36M	99.56