Form **990-PF**Department of the Treasury

EXTENDED TO MAY 15, 2025 Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047 **2023**Open to Public Inspection

JUL 1, 2023 and ending JUN 30, 2024 For calendar year 2023 or tax year beginning Name of foundation A Employer identification number SCARLETT FAMILY FOUNDATION 20-1980932 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 4117 HILLSBORO PIKE 103255 (615)377-4600City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 37215-2728 NASHVILLE, TN G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation **H** Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here ... 261, 667, 800 . (Part I, column (d), must be on cash basis.) Part I Analysis of Revenue and Expenses (c) Adjusted net (d) Disbursements for charitable purposes (b) Net investment (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) expenses per books income income (cash basis only) Contributions, gifts, grants, etc., received N/A2 Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 5,088,589. 5,088,589. STATEMENT Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 80,338,361 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 115,945,613. 80,338,361. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross sales less returns 10a and allowances b Less: Cost of goods sold c Gross profit or (loss) 1,349,369. 1,349,369 STATEMENT 2 11 Other income 86,776,319. 86,776,319. 12 Total. Add lines 1 through 11 315,280. 0. 315,280. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 136,406. 136,406. 0. 57,699. 0. 57,699. 15 Pension plans, employee benefits 5,532. 0. 5,532. 16a Legal fees STMT Administrative Expenses 0. b Accounting fees STMT 4 39,950. 39,950. c Other professional fees STMT 634,732. 485,382. 149,350. 17 Interest Taxes STMT 6 1,059,104. 35,842. 26,262. 18 Depreciation and depletion 19 2,017. 0. 2,017. Occupancy 20 14,206. 21 Travel, conferences, and meetings 0. 14,206. 22 Printing and publications 2,624. 0. 2,624. 23 Other expenses STMT 7 735,995. 898,958. 161,792. 24 Total operating and administrative 3,166,508**.** 1,257,219. 911,118. expenses. Add lines 13 through 23 7,577,332. 7,577,332. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 8,488,450. 10,743,840. 1,257,219. Add lines 24 and 25 27 Subtract line 26 from line 12: 76,032,479 a Excess of revenue over expenses and disbursements 85,519,100. **b Net investment income** (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

323501 12-20-23

P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End o	•
=		Column should be for end-or-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing		44 -44 -44	
	2	Savings and temporary cash investments	20,626,492.	68,734,702.	68,734,702.
	3	Accounts receivable			
		Less; allowance for doubtful accounts			
	4	Pledges receivable			
		Less; allowance for doubtful accounts			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
Ŋ		Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
		Investments - corporate bonds			
		Investments - land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 10	141,823,938.	171,537,026.	192,927,246.
	14	Land, buildings, and equipment: basis 15,470.			
		Less: accumulated depreciation STMT 9 9,618.	0.	5,852.	5,852.
	15	Other assets (describe STATEMENT 11)	0.	0.	0.
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	162,450,430.	240,277,580.	261,667,800.
	17	Accounts payable and accrued expenses	1,971.	4,254.	
		Grants payable			
Ø		Deferred revenue			
Liabilities		Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
Ξ	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	1,971.	4,254.	
		Foundations that follow FASB ASC 958, check here			
S		and complete lines 24, 25, 29, and 30.			
ũ		Net assets without donor restrictions			
sala	25	Net assets with donor restrictions			
Fund Balan		Foundations that do not follow FASB ASC 958, check here X			
Ē		and complete lines 26 through 30.			
ō		Capital stock, trust principal, or current funds	0.	0.	
ets		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ass	28	Retained earnings, accumulated income, endowment, or other funds \dots		240,273,326.	
Net Assets	29	Total net assets or fund balances	162,448,459.	240,273,326.	
2			160 450 430	240 277 500	
_	30	Total liabilities and net assets/fund balances	162,450,430.	240,2//,580.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29		
•				1	162,448,459.
2	•	amount from Part I, line 27a			76,032,479.
		r increases not included in line 2 (itemize)			1,818,008.
		lines 1, 2, and 3			240,298,946.
		eases not included in line 2 (itemize) BOOK/TAX DIFFEREI	NCES	5	25,620.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co			240,273,326.
		, , , , , , , , , , , , , , , , , , , ,			Form 990-PF (2023)

Part IV Capital Gains a	and Losses for Tax on In	vestment Income	SE	E ATTACHE	D STATEM	ENT
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acqu P - Purchas D - Donatic			How acquired - Purchase (c	c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a						
b						
C						
d						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		((h) Gain or (loss (e) plus (f) minus	
a						
b						
C						
d 115 045 613		25 607 2				0 220 261
e 115,945,613.	ya anin in column (h) and award but	35,607,21	54.			0,338,361.
Complete only for assets showin	ng gain in column (h) and owned by t			(I) G col (k	Gains (Col. (h) gain k), but not less tha	minus n -0-) or
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			_osses (from col. (
a						
b						
C						
d					0	0 220 261
е				<u> </u>	0	0,338,361.
2 Capital gain net income or (net ca	pital loss) $\left\{ egin{array}{l} ext{If gain, also enter} \ ext{If (loss), enter -0} \end{array} ight.$		}	2	8	0,338,361.
3 Net short-term capital gain or (los			١ ،			
Part I, line 8	column (c). See instructions. If (loss	···	}	3	N/A	
Part V Excise Tax Bas	sed on Investment Incom	e (Section 4940(a), 4	940(k	o), or 4948 - se	ee instructio	ns)
1a Exempt operating foundations	described in section 4940(d)(2), che	ck here $\ \dots \ \square$ and enter "	'N/A" on	line 1.		
Date of ruling or determination		ach copy of letter if necessar	-	instructions)	1	1,188,715.
	enter 1.39% (0.0139) of line 27b. Ex					
	. (b)					
,	ic section 4947(a)(1) trusts and taxa	ble foundations only; others, e	enter -0-	-)	2	1 100 715
						1,188,715.
, , ,	tic section 4947(a)(1) trusts and tax		enter -C)-)	4	0. 1,188,715.
	me. Subtract line 4 from line 3. If ze	ro or less, enter -U-			5	1,100,713.
6 Credits/Payments:	nd 2000 syarpayment aradited to 20	00 60	1	,009,622.		
	nd 2022 overpayment credited to 20 tax withheld at source			0.		
	tension of time to file (Form 8868)			0.		
	y withheld			0.		
7 Total credits and payments. Ad					7	1,009,622.
	ment of estimated tax. Check here	X if Form 2220 is attached			8	0.
	and 8 is more than line 7, enter amo				9	179,093.
	than the total of lines 5 and 8, enter				10	,
	pe: Credited to 2024 estimated tax	• • • • • • • • • • • • • • • • • • • •		Refunded	11	
						orm 990-PF (2022)

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 1b X If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-P0L for this year? d Enter the amount (if any) of tax on political expenditure (section 4955) imposed during the year: (1) On the foundation. \$ 0 . (2) On foundation managers. \$ 0 . e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0 . 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 IX 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? TN b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruc</i>
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TN b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)
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9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar
year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 12 10 X
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of
section 512(b)(13)? If "Yes," attach schedule. See instructions
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?
If "Yes," attach statement. See instructions
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 X
Website address WWW.SCARLETTFOUNDATION.ORG
14 The books are in care of LBMC Telephone no. 615-377-4600
Located at P.O. BOX 1869, BRENTWOOD, TN ZIP+4 37024-1869
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here
and enter the amount of tax-exempt interest received or accrued during the year 15 N/A
16 At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority over a bank, Yes No
acquisition on other financial acquisit in a foreign equiption.
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the
foreign country
Form 990-PF (2023)

Fait VI-D	Statements negariting Activities for which I offit 4720 May be nequired				
File Form	4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a During the	year, did the foundation (either directly or indirectly):				
(1) Engag	e in the sale or exchange, or leasing of property with a disqualified person?		1a(1)		X
(2) Borrov	money from, lend money to, or otherwise extend credit to (or accept it from)				
a disqı	ialified person?		1a(2)		_X_
(3) Furnis	n goods, services, or facilities to (or accept them from) a disqualified person?		1a(3)		X
(4) Pay co	mpensation to, or pay or reimburse the expenses of, a disqualified person?		1a(4)		_X_
(5) Transf	er any income or assets to a disqualified person (or make any of either available				
for the	benefit or use of a disqualified person)?		1a(5)	igsqcut	_X_
	to pay money or property to a government official? (Exception. Check "No"				
if the f	oundation agreed to make a grant to or to employ the official for a period after				
termin	ation of government service, if terminating within 90 days.)		1a(6)		_X_
b If any answ	er is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
section 53.	4941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A	1b		
	ns relying on a current notice regarding disaster assistance, check here				
d Did the fou	ndation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
before the	irst day of the tax year beginning in 2023?		1d		_X_
2 Taxes on fa	ilure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
defined in s	ection 4942(j)(3) or 4942(j)(5)):				
a At the end	of tax year 2023, did the foundation have any undistributed income (Part XII, lines				
6d and 6e)	for tax year(s) beginning before 2023?		2a	igsquare	<u>X</u>
If "Yes," list	the years , , , , ,				
b Are there a	ny years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect				
valuation o	f assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach				
	see instructions.)	N/A	2b	\square	
c If the provi	sions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	ndation hold more than a 2% direct or indirect interest in any business enterprise at any time				
during the			3a	\square	X
b If "Yes," did	it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or disqualified persons after				
	69; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispo	ose			
	acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,				
	, to determine if the foundation had excess business holdings in 2023.)		3b	\longmapsto	
	ndation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
	ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose th	at			
had not be	en removed from jeopardy before the first day of the tax year beginning in 2023?		4b		X
		Fo	orm 99 0)-PF	(2023)

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Form 990-PF (2023) SCARLETT FAMILY FOUNDATION Part VI-B Statements Regarding Activities for Which F	ON orm 4720 May Be R	equired (20-1980	932	I	Page 6
5a During the year, did the foundation pay or incur any amount to:	orm 4720 May Be II	cquired (contin	uea)		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e)\ ?			5a(1)		X
(2) Influence the outcome of any specific public election (see section 4955); o				54(1)		
any voter registration drive?				5a(2)		Х
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?			5a(3)	Х	
(4) Provide a grant to an organization other than a charitable, etc., organization						
4945(d)(4)(A)? See instructions				5a(4)		Х
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or				
the prevention of cruelty to children or animals?				5a(5)		X
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations				
section 53.4945 or in a current notice regarding disaster assistance? See instru	ıctions			5b		X
c Organizations relying on a current notice regarding disaster assistance, check h	ere					
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr						
expenditure responsibility for the grant?			N/A	5d		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	* *					
a personal benefit contract?				6a		X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b		X
If "Yes" to 6b, file Form 8870.						
7a At any time during the tax year, was the foundation a party to a prohibited tax s				7a		X
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or					
excess parachute payment(s) during the year?				8		Х
Part VII Information About Officers, Directors, Truster Paid Employees, and Contractors	es, Foundation Mai	nagers, Highly				
List all officers, directors, trustees, and foundation managers and the second se	eir compensation					
. List all silions, all sociols, a asisos, and realization managers and a	_	(c) Compensation	(d) Contributions	to	(e) Exp	ense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions employee benefit pla and deferred	^{ins} a	(e) Exp ccount, allowa	other
	το μοσιτίστι	enter -o-)	compensation	+	anowai	1003
SEE STATEMENT 13		315,280.	57.699			0.
		3237233	3,,033	1		
2 Compensation of five highest-paid employees (other than those inc	uded on line 1). If none,	enter "NONE."	l .			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(a) Companyation	(d) Contributions employee benefit pla		(e) Exp ccount,	ense
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	"	allowai	1ces
NONE						
					<u> </u>	
Total number of other employees paid over \$50,000						0

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Part VII	Information About Officers, Directors, Trustees, Foundation Managers Paid Employees, and Contractors (continued)	, Highly	
3 Five hig	phest-paid independent contractors for professional services. If none, enter "NONE."		
		Type of service	(c) Compensation
	NONE		
-			
-			
Total numb	er of others receiving over \$50,000 for professional services		0
Part VIII	-A Summary of Direct Charitable Activities		
List the fou	ndation's four largest direct charitable activities during the tax year. Include relevant statistical information suc	h as the	Expenses
	organizations and other beneficiaries served, conferences convened, research papers produced, etc.		
1	N/A		
2			
3			
·			
4			
•			
Part VIII	I-B Summary of Program-Related Investments	•	
Describe th	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1	N/A		
-			
2			
-	ogram-related investments. See instructions.		
3			
Total Add	lines 1 through 2		0.
ı otal. Add	lines 1 through 3		<u>U•</u>

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SCARLETT FAMILY FOUNDATION

P	art IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	168,563,293.
	Average of monthly cash balances	1b	39,133,945.
	Fair market value of all other assets (see instructions)	1c	
	Total (add lines 1a, b, and c)	1d	207,697,238.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	207,697,238.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	3,115,459.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	204,581,779.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	10,229,089.
P	art X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd certair	1
_	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	10,229,089.
2a	Tax on investment income for 2023 from Part V, line 5		
b	Tax on investment income for 2023 from Part V, line 5 Income tax for 2023. (This does not include the tax from Part V.) 2a 1,188,715. 2b 91,624.		
C	Add lines 2a and 2b	2c	1,280,339.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	8,948,750.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	8,948,750.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	8,948,750.
P	art XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	8,488,450.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
4		4	8,488,450.

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1 Distributable amount for 2023 from Part X,	Сограс	Tours prior to ESEE	LULL	2020
line 7				8,948,750.
2 Undistributed income, if any, as of the end of 2023:				
a Enter amount for 2022 only			7,547,876.	
b Total for prior years:				
g Excess distributions carryover, if any, to 2023:		0.		
- I i i i i i i i i i i i i i i i i i i				
L F 0040				
F 0000				
15 0004				
- France 0000				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2023 from				
Part XI, line 4: \$ 8,488,450.				
a Applied to 2022, but not more than line 2a			7,547,876.	
b Applied to undistributed income of prior			.,,,,,,,,,	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2023 distributable amount				940,574.
e Remaining amount distributed out of corpus	0.			2 2 3 7 3 2 2 2
5 Excess distributions carryover applied to 2023				
(If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2022. Subtract line			_	
4a from line 2a. Taxable amount - see instr. \dots			0.	
f Undistributed income for 2023. Subtract				
lines 4d and 5 from line 1. This amount must				0 000 456
be distributed in 2024				8,008,176.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2018	0.			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a	0.			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9: a Excess from 2019				
b Excess from 2020				
c Excess from 2021				
d Excess from 2022				
e Excess from 2023				

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Part XIII Private Operating Fo	oundations (see ins	tructions and Part VI-	A, question 9)	N/A	<u> </u>
1 a If the foundation has received a ruling or	determination letter that	it is a private operating			
foundation, and the ruling is effective for	2023, enter the date of th	ne ruling			
b Check box to indicate whether the found				4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2023	(b) 2022	(c) 2021	(d) 2020	(e) Total
investment return from Part IX for					
each year listed					
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
<u> </u>					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part IX, line 6, for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
. ,					
an exempt organization					
Part XIV Supplementary Info	rmation (Complet	e this part only i	the foundation	 had \$5 000 or mor	e in assets
at any time during the					
1 Information Regarding Foundation	•				
a List any managers of the foundation who			ibutions received by the	foundation before the clos	e of any tax
year (but only if they have contributed m	. , , ,	ection 507(a)(2).)			
JOSEPH H. SCARLETT, C	JR.				
b List any managers of the foundation who			or an equally large portic	on of the ownership of a pa	rtnership or
other entity) of which the foundation has	a 10% or greater interest	i.			
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loan, S	Scholarship, etc., Pro	ograms:		
Check here if the foundation	only makes contributions	s to preselected charitabl	e organizations and does	s not accept unsolicited red	quests for funds. If
the foundation makes gifts, grants, etc.,	to individuals or organizat	tions under other conditi	ons, complete items 2a,	b, c, and d.	
a The name, address, and telephone numb	er or email address of the	e person to whom applic	ations should be address	sed:	
SEE STATEMENT 14					
b The form in which applications should b	e submitted and informati	on and materials they sh	ould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographical	l areas, charitable fields,	kinds of institutions, or o	other factors:	

Part XIV Supplementary Informatio 3 Grants and Contributions Paid During the	· · · · · · · · · · · · · · · · · · ·	Pavment		
Recipient	If recipient is an individual.		Duma f	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
50CAN (FISCAL AGENT FOR SUMMER BOOST		501(C)(3)	SUPPORT FOR LITERACY	
'23-'24) 1380 MONROE ST NW NO 413			AND MATH TUTORING	
WASHINGTON, DC 20010				150,000
,				•
AADI PATEL			TUITION	
402 VAIL RUN MT.JULIET, TN 37122				7,500
,				
AADI PATEL 402 VAIL RUN			TUITION	
MT.JULIET, TN 37122				7,500
AHMED ELRAYAH 2640 GLENROSE AVE			TUITION	
NASHVILLE, TN 37210				7,500
AHMED ELRAYAH			TUITION	
2640 GLENROSE AVE			1011101	
NASHVILLE, TN 37210				7,500
Total SEE CC	NTINUATION SHEE	Ţ(S)	3a	7,577,332
b Approved for future payment				
AVENTURA COMMUNITY SCHOOLS		501(C)(3)	SUPPORT FOR DIRECTOR	
3010 TUGGLE AVENUE			OF OPERATIONS AND	
NASHVILLE, TN 37211			DIRECTOR OF STUDENT	
			SUPPORT	230,000
BACKFIELD IN MOTION		501(C)(3)	SUPPORT TO EXPAND	
920 WOODLAND ST			SUMMER ACADEMY TO	_
NASHVILLE, TN 37205			YEAR-ROUND PROGRAM	50,000
BIG BROTHERS BIG SISTERS OF MIDDLE		501(C)(3)	SUPPORT FOR LITERACY	
TENNESSEE			AND E-MENTORING	
1704 CHARLOTTE AVE, STE 130			PROGRAMS	
NASHVILLE, TN 37203	<u> </u>	 		113,500
Total SEE CC	NTINUATION SHEE	T(S)		10,856,377 rm 990-PF (2023

Part XV-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated	business income		led by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	5,088,589.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income	523000	437,304.	14	912,065.	
8 Gain or (loss) from sales of assets other than inventory		-	18	80,338,361.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		437,304.		86,339,015.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	86,776,319.
(See worksheet in line 13 instructions to verify calculations.)					

Part XV-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
í————	
-	

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SCARLETT FAMILY FOUNDATION Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

1	1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)								Yes	No
	(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?									
а	a Transfers from the reporting foundation to a noncharitable exempt organization of:							4 (4)		v
		sh								X
h		er assets						1a(2)		Λ
U		Other transactions: (1) Sales of assets to a noncharitable exempt organization								Х
		chases of assets from a nor								X
		ntal of facilities, equipment,								X
		mbursement arrangements								X
		ins or loan guarantees								Х
		formance of services or me								Х
C		of facilities, equipment, ma								Х
		swer to any of the above is							ets,	
		ces given by the reporting fo			ed less than fair market valu	e in any transaction	or sharing arrangen	nent, show in		
		(d) the value of the goods,	· · · · · · · · · · · · · · · · · · ·							
(a) ∟i	ne no.	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	n of transfers, transaction	ns, and sharing arra	angemen	its
				N/A						
2a		undation directly or indirect	•		, ,				37	٦
		on 501(c) (other than section		ction 527?				Yes	X	No
b If "Yes," complete the following schedule. (a) Name of organization				(b) Type of organization		(c) Description of re	lationehin			
		N/A	janization		(b) Type of organization		(c) Description of re	adionsinp		
		II/A								
		der penalties of perjury, I declare						May the IRS of	liscuss t	his
Sig	gn	and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.						return with the shown below	e prepare	er
He	re				PRESIDENT/CEO [_ X Yes		No
	Si	gnature of officer or trustee			Date	Title				
		Print/Type preparer's name		Preparer's signature		Date		PTIN		
Do	: A					11/14/24	self- employed	-01006		
Paid Preparer Use Only		ABIGAIL CAMPBELL					P01296			
		TITLI STIGITIO	, PC				Firm's EIN 62	-119975	1	
		Firm's address P.O. BOX 1869								
							Phone no. (6)	15)377-	460	n
DMDMINOOD, IN 37024 1009					<u> </u>		TEHOREHO. (O.	Form 99 (

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SCARLETT FAMILY F	ZOLIND A TIT ON		NTINU -1980	ATION FOR	990-PF, PAGE 1	
Part IV Capital Gains and Los		1 1 2 0 0 .	772 1	AGE I	01 1	
(a) List and	describe the kind(s) of property solick warehouse; or common stock, 2	ld, e.g., real estate, 00 shs. MLC Co.		(b) How acquired P - Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a EQUITABLE TRUST	<u> </u>			P	, , , , , ,	, , , ,
b EQUITABLE TRUST		TR TRIITTON		P		
c JETSTREAM GLOBA		IKIDOTION		P		
d CARLYLE PROPERT				P		
e NGP NATURAL RES				P		
f CARLYLE STRUCTU		T,P		P		
q EQUITABLE TRUST				P		
h CARLYLE PRIVATE			TEL)	P		
; CARLYLE PEA BLO		LP - PFIC		P		
i	3011211 1 0112 1117 1			-		
k						
1						
m						
n						
0						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	S) Gain or (loss) olus (f) minus (g)	
a 114,843,460.		34,286,8	64.		80,	556,596.
b 398,470.		, , , , ,				398,470.
C		1,298,2	42.			298,242.
7,687.		, , , , , , , , , , , , , , , , , , ,			•	7,687.
e 507,105.						507,105.
f		21,1	54.			-21,154.
g		9	92.			-992.
h 4,410.						4,410.
184,481.						184,481.
i						-
k						
ı						
m						
n						
0						
Complete only for assets showin	g gain in column (h) and owned by	the foundation on 12/31/69			sses (from col. (h))	
(i) F.M.V. as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		Gains (excess of col. (h) gain over col. (k), but not less than "-0-")			
a					80,	556,596.
b						398,470.
С					-1,	298,242.
d						7,687.
e						507,105.
f						-21,154.
g						-992.
h						4,410.
<u> </u>						184,481.
j						
k						
m						

3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8
	3591 -01-23

 $\textbf{2} \quad \text{Capital gain net income or (net capital loss)} \quad \cdots \quad \left\{ \begin{array}{l} \text{If gain, also enter in Part I, line 7} \\ \text{If (loss), enter "-0-" in Part I, line 7} \end{array} \right\}$

80,338,361.

N/A

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor ALEXANDRIA ANDERSON TUITION 576 HONEY FORK RD INDIAN MOUND, TN 37079 7,500. ALEXANDRIA ANDERSON TUITION 576 HONEY FORK RD INDIAN MOUND, TN 37079 7,500. ALEXIA WILLIAMS TUITION 173 BRENDA COURT ANTIOCH, TN 37013 7,500. ALEXIA WILLIAMS TUITION 173 BRENDA COURT ANTIOCH, TN 37013 7,500. ALYSSA HAMPTON TUITION 179 DAVES HOLLOW ROAD FAYETTEVILLE, TN 37334 6,498. ALYSSA HAMPTON TUITION 179 DAVES HOLLOW ROAD FAYETTEVILLE, TN 37334 6,498. AMARACHI WABOSO TUITION 2203 WILDFLOWER LANE NASHVILLE, TN 37217 7,500. AMARACHI WABOSO TUITION 2203 WILDFLOWER LANE NASHVILLE, TN 37217 7,500. AMARACHI WABOSO TUITION 2203 WILDFLOWER LANE NASHVILLE, TN 37217 3,372. AMELIA KING TUITION 446, JONES LANE HENDERSONVILLE, TN 37075 7,500. 7,397,332. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor AMELIA KING TUITION 446, JONES LANE HENDERSONVILLE, TN 37075 7,500. ANDREW SPENCER TUITION 401 HIAWATHA CT NASHVILLE, TN 37221 3,638. ANDREW SPENCER TUITION 401 HIAWATHA CT NASHVILLE, TN 37221 3,638. ANDREW SPENCER TUITION 401 HIAWATHA CT NASHVILLE, TN 37221 4,074. ANGEL ZARATE TUITION 106 FRANKLIN STREET MCMINNVILLE, TN 37110 4,105. ANGEL ZARATE TUITION 106 FRANKLIN STREET MCMINNVILLE, TN 37110 4,105. ANNA JONES TUITION 1917 BASKINBROOK COURT MURFREESBORO, TN 37130 7,500. ANNA JONES TUITION 1917 BASKINBROOK COURT MURFREESBORO, TN 37130 7,500. ANNA YATES TUITION 2434 TOUR DRIVE MURFREESBORO, TN 37130 7,500. ANNA YATES TUITION 2434 TOUR DRIVE MURFREESBORO, TN 37130 7,500. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor ANNALISE BROWN TUITION 1406 WOODLAND STREET NASHVILLE, TN 37206 7,500. ANNALISE BROWN TUITION 1406 WOODLAND STREET NASHVILLE, TN 37206 7,500. ARIANNA SMITH-FORTE TUITION 1320 ALLMON DRIVE CLARKSVILLE, TN 37042 7,500. ARIANNA SMITH-FORTE TUITION 1320 ALLMON DRIVE CLARKSVILLE, TN 37042 7,500. ASHLEY BUTCHER TUITION 17 PATTON ROAD FAYETTEVILLE, TN 37334 6,436. ASHLEY BUTCHER TUITION 17 PATTON ROAD FAYETTEVILLE, TN 37334 6,436. AVERY ROTH TUITION 1028 WOODVALE DR NASHVILLE, TN 37204 6,205. AVERY ROTH TUITION 1028 WOODVALE DR 6,205. NASHVILLE, TN 37204 AYA ALWAN TUITION 515 JOHNSTOWN DR SMYRNA, TN 37167 7,500. AYA ALWAN TUITION 515 JOHNSTOWN DR SMYRNA, TN 37167 7,500. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor AYA SHARIF TUITION 3988 KEELEY DR. NASHVILLE, TN 37211 4,712. AYA SHARIF TUITION 3988 KEELEY DR. NASHVILLE, TN 37211 4,712. BACKFIELD IN MOTION 501(C)(3) SUPPORT TO EXPAND 920 WOODLAND ST SUMMER ACADEMY TO NASHVILLE, TN 37205 YEAR-ROUND PROGRAM 50,000. BAO LE TUITION 340 ELYSIAN FIELDS RD NASHVILLE, TN 37211 7,500. BAO LE TUITION 340 ELYSIAN FIELDS RD NASHVILLE, TN 37211 7,500. BIG BROTHERS BIG SISTERS OF MIDDLE 501(C)(3) SUPPORT FOR LITERACY TENNESSEE AND E-MENTORING 1704 CHARLOTTE AVE, STE 130 PROGRAMS NASHVILLE, TN 37203 87,500. BOYS AND GIRLS CLUBS OF MIDDLE 501(C)(3) SUPPORT FOR MNPS TENNESSEE IN-SCHOOL LITERACY 1704 CHARLOTTE AVE, STE 200 PILOT NASHVILLE, TN 37203 186,350. BRANCH OF NASHVILLE (THE) 501(C)(3) SUPPORT FOR ADULT ELL 41 TUSCULUM RD PROGRAM ANTIOCH, TN 37013 20,000. BRIANNA HOWELL TUITION 3808 PINEY RD NUNNELLY, TN 37137 7,500. BRIANNA HOWELL TUITION 3808 PINEY RD NUNNELLY, TN 37137 7,500. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor CADEY COMEY TUITION 24255 PACIFIC COAST HWY 2460 MALIBU, CA 90263-2460 7,500. CADEY COMEY TUITION 24255 PACIFIC COAST HWY 2460 MALIBU, CA 90263-2460 7,500. CADIZ CANTWELL TUITION 1353 HWY. 70 KINGSTON SPRINGS, TN 37082 7,500. CADIZ CANTWELL TUITION 1353 HWY. 70 KINGSTON SPRINGS, TN 37082 7,500. CALEB HUDDLESTON TUITION 5085 SMITH SPRINGS PARKWAY 4,445. ANTIOCH, TN 37013 CALEB HUDDLESTON иотттип 5085 SMITH SPRINGS PARKWAY ANTIOCH, TN 37013 4,445. CAMERON WALKER TUITION 218 INNSBROOKE BLVD MURFREESBORO, TN 37128 7,500. CAMERON WALKER TUITION 218 INNSBROOKE BLVD MURFREESBORO, TN 37128 7,500. CAMPBELL JEFFREY TUITION 315 HAYESWOOD DRIVE BRENTWOOD, TN 37027 7,500. CAMPBELL JEFFREY TUITION 315 HAYESWOOD DRIVE BRENTWOOD, TN 37027 7,500. Total from continuation sheets

Part XIV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor CAREN ZAREF TUITION 1101 CROSSFIELD DR. NOLENSVILLE, TN 37135 2,500. CAREN ZAREF TUITION 1101 CROSSFIELD DR. NOLENSVILLE, TN 37135 7,500. CAREN ZAREF TUITION 1101 CROSSFIELD DR. NOLENSVILLE, TN 37135 1,040. CAROLINE WAUGH TUITION 410 MAJESTY DRIVE MURFREESBORO, TN 37129 7,500. CAROLINE WAUGH TUITION 410 MAJESTY DRIVE MURFREESBORO, TN 37129 7,500. CHANDLER MICHAEL TUITION 1291 RED BUD LANE COLUMBIA, TN 38401 4,712. CHERYL QUARTEY TUITION 2935 POMOA PL MURFREESBORO, TN 37130 287. CHERYL QUARTEY TUITION 2935 POMOA PL MURFREESBORO, TN 37130 29,426. CHERYL QUARTEY TUITION 2935 POMOA PL MURFREESBORO, TN 37130 287. CLARA THOMPSON TUITION 1605 HATCHETT HOLLOW ROAD CORNERSVILLE, TN 37047 7,500.

Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor CLARA THOMPSON TUITION 1605 HATCHETT HOLLOW ROAD CORNERSVILLE, TN 37047 7,500. COMMUNITIES IN SCHOOLS OF TENNESSEE 501(C)(3) SUPPORT FOR MIDDLE 1207 8TH AVE S TENN RURAL COUNTIES INITIATIVE NASHVILLE, TN 37212 75,000. COMMUNITIES IN SCHOOLS OF TENNESSEE 501(C)(3) SUPPORT FOR MIDDLE 1207 8TH AVE S TENN RURAL COUNTIES NASHVILLE, TN 37212 INITIATIVES AND COLLEGE READINESS 100,000. COMMUNITY FOUNDATION OF MIDDLE 501(C)(3) TORNADO RELIEF FOR TENNESSEE DAVIDSON COUNTY (\$5K) 3833 CLEGHORN AVE NO 400 AND MIDDLE TENNESSEE NASHVILLE, TN 37215 (\$15K) 20,000. CONEXION AMERICA 501(C)(3) SUPPORT FOR PARENTS AS 2195 NOLENSVILLE PIKE PARTNERS NASHVILLE, TN 37211 80,000. CONEXTON AMERICA 501(C)(3) SUPPORT FOR ESCALERA 2195 NOLENSVILLE PIKE NASHVILLE, TN 37211 200,000. CONNOR TAYLOR TUITION 508 BANSHIRE COURT BRENTWOOD, TN 37027 7,500. CONNOR TAYLOR TUITION 508 BANSHIRE COURT BRENTWOOD, TN 37027 7,500. CORAZON FUNK TUITION 709 MYHR DRIVE NASHVILLE, TN 37221 5,666. CORAZON FUNK TUITION 709 MYHR DRIVE NASHVILLE, TN 37221 5,666. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor CORI DANNEMILLER TUITION 148 CRESTFIELD PLACE FRANKLIN, TN 37069 7,500. CORI DANNEMILLER TUITION 148 CRESTFIELD PLACE FRANKLIN, TN 37069 7,500. DAKOTA ANDERSON TUITION 101 CABIN CREEK COURT SPRING HILL, TN 37174 4,956. DAKOTA ANDERSON TUITION 101 CABIN CREEK COURT SPRING HILL, TN 37174 4,956. DEVIN BESTER TUITION 5900 EATONS CREEK ROAD JOELTON, TN 37080 7,500. DEVIN BESTER TUITION 5900 EATONS CREEK ROAD JOELTON, TN 37080 7,500. DIVERSE LEARNERS COOPERATIVE (DLC) 501(C)(3) SUPPORT FOR PROGRAM 8011 BROOKS CHAPEL RD, STE 3083 SPECIALISTS BRENTWOOD, TN 37027 175,000. EDUCATION TRUST OF TENNESSEE (THE) 501(C)(3) SUPPORT FOR RESEARCH. 1501 K ST. NW STE 200 DATA ANALYSIS AND WASHINGTON, DC 20005 CAPACITY BUILDING 50,000. EDUCATION TRUST OF TENNESSEE (THE) 501(C)(3) RESEARCH AND CONVENING 1501 K ST. NW STE 200 ON K-12 AND HIGHER WASHINGTON, DC 20005 EDUCATION POLICY 50,000. EDUCATORS' COOPERATIVE (EDCO) (THE) 501(C)(3) SUPPORT FOR OPERATIONS 1410 HEMLOCK AVENUE NASHVILLE, TN 37216 40,000. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor ELIZABETH LEGGETT TUITION 328 STANLEY PARK LANE FRANKLIN, TN 37069 7,500. ELIZABETH LEGGETT TUITION 328 STANLEY PARK LANE FRANKLIN, TN 37069 7,500. ELLA DAUGHERTY TUITION 2304 ASHWOOD AVE NASHVILLE, TN 37212 15,000. ELLA DAUGHERTY TUITION 2304 ASHWOOD AVE NASHVILLE, TN 37212 15,000. EMELY SORTO-GARCIA TUITION 5913 BELLE OAKS PLACE ANTIOCH, TN 37013 7,500. EMELY SORTO-GARCIA TUITION 5913 BELLE OAKS PLACE ANTIOCH, TN 37013 7,500. EMILY RUSSELL TUITION 209 ALEX DRIVE PULASKI, TN 38478 1,250. EMILY RUSSELL TUITION 209 ALEX DRIVE PULASKI, TN 38478 1,250. EMMA FLOOD TUITION 140 HUFFINES LANE PLEASANT SHADE, TN 37145 5,009. EMMA FLOOD TUITION 140 HUFFINES LANE PLEASANT SHADE, TN 37145 6,632. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor EMME SMITH TUITION PO BOX 446 MC MINNVILLE, TN 37111 6,234. EMME SMITH TUITION PO BOX 446 MC MINNVILLE, TN 37111 6,234. EQUAL CHANCE FOR EDUCATION 501(C)(3) SUPPORT FOR PROGRAM 3715 WEST END AVE COORDINATOR POSITION NASHVILLE, TN 37205 50,000. ETHAN BENDHEIM TUITION 3224 LAUREN DRIVE YADKINVILLE, TN 27055 7,500. ETHAN BENDHEIM TUITION 3224 LAUREN DRIVE YADKINVILLE, NC 27055 7,500. ETHAN MORROW TUITION 3334 DABNEY LANE CLARKSVILLE, TN 37043 15,000. ETHAN MORROW TUITION 3334 DABNEY LANE CLARKSVILLE, TN 37043 15,000. EUGENE LIM TUITION 2801 PATRIOT WAY NASHVILLE, TN 37214 7,500. EUGENE LIM TUITION 2801 PATRIOT WAY NASHVILLE, TN 37214 7,500. FATIMA CASTELLANOS TUITION 3449 HARBORWOOD CIR NASHVILLE, TN 37214 7,500. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor FRANKLIN ROAD ACADEMY 501(C)(3) SUPPORT FOR FRA SUMMER 4700 FRANKLIN ROAD INNOVATION INSTITUTE NASHVILLE, TN 37220 FOR MNPS STUDENTS 33,334. FRANKLIN ROAD ACADEMY 501(C)(3) SUPPORT FOR FRA SUMMER 4700 FRANKLIN ROAD INNOVATION INSTITUTE NASHVILLE, TN 37220 FOR MNPS STUDENTS 35,000. GARRISON HAROLD TUITION 1250 BAKER CREEK DR SPRING HILL, TN 37174 7,500. GARRISON HAROLD TUITION 1250 BAKER CREEK DR SPRING HILL, TN 37174 7,500. GENEVIEVE JEAN-PIERRE TUITION 353 SOLITUDE CIRCLE GOODLETTSVILLE, TN 37072 15,000. GENEVIEVE JEAN-PIERRE TUITION 353 SOLITUDE CIRCLE GOODLETTSVILLE, TN 37072 15,000. GENNA SMITH TUITION 4836 CORNING DRIVE NASHVILLE, TN 37211 7,500. GENNA SMITH TUITION 4836 CORNING DRIVE NASHVILLE, TN 37211 7,500. GENTRY'S EDUCATION CENTER AT THE 501(C)(3) SUPPORT FOR STORE FRONT AFTER-SCHOOL LITERACY 4221 WARREN RD PROGRAM FRANKLIN, TN 37067 50,000. GOAL COLLECTIVE (FISCAL AGENT IS 501(C)(3) SUPPORT FOR GOAL TCASN) COLLECTIVE OPERATIONS 1704 CHARLOTTE AVE, STE 200 NASHVILLE, TN 37220 50,000.

Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor GRACEY SUGGS TUITION 5487 HIGHWAY 48 CUMBERLAND FURNACE, TN 37051 5,000. GRACEY SUGGS TUITION 5487 HIGHWAY 48 CUMBERLAND FURNACE, TN 37051 1,537. GRACEY SUGGS TUITION 5487 HIGHWAY 48 CUMBERLAND FURNACE, TN 37051 1,537. HANNAH DODSON TUITION 1145 TEACHER DRIVE CLARKSVILLE, TN 37043 15,000. HANNAH DODSON TUITION 1145 TEACHER DRIVE CLARKSVILLE, TN 37043 15,000. HANNAH DODSON TUITION 1145 TEACHER DRIVE CLARKSVILLE, TN 37043 1,025. HANNAH HARRELL TUITION 5711 JACOBS HOLLOW ROAD READYVILLE, TN 37149 2,360. HANNAH HARRELL TUITION 5711 JACOBS HOLLOW ROAD READYVILLE, TN 37149 2,360. HILDE MEDOVICH TUITION 3129 BELWOOD ST NASHVILLE, TN 37203 7,500. HILDE MEDOVICH TUITION 3129 BELWOOD ST NASHVILLE, TN 37203 7,500. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient HOMEWORK HOTLINE, INC. 501(C)(3) SUPPORT FOR OPERATIONS 4805 PARK AVENUE NASHVILLE, TN 37209 30,000. HORIZONS AT USN 501(C)(3) SUPPORT FOR SUMMER 2000 EDGEHILL AVE HORIZONS HIGH SCHOOL NASHVILLE, TN 37212 PROGRAM FOR MNPS STUDENTS 43,000. INSTRUCTION PARTNERS 501(C)(3) SUPPORT FOR 604 GALLATIN AVE, STE 202 INSTRUCTIONAL NASHVILLE, TN 37206 LEADERSHIP RESEARCH AND PILOT 250,000. JACK HARTERT TUITION 1410 DALLAS AVENUE NASHVILLE, TN 37212 7,500. JACK HARTERT TUITION 1410 DALLAS AVENUE NASHVILLE, TN 37212 7,500. JACKSON PFEFFERKORN TUITION 5086 WILSON PIKE ARRINGTON, TN 37014 7,500. JACKSON PFEFFERKORN TUITION 5086 WILSON PIKE ARRINGTON, TN 37014 7,500. JACOB REHBINE TUITION 848 STONEBROOK BLVD. 7,500. NOLENSVILLE, TN 37135 JACOB REHBINE TUITION 848 STONEBROOK BLVD. NOLENSVILLE, TN 37135 7,500. JADE ERICKSON TUITION 494 LOVEJOY RD SPARTA, TN 38583 4,659. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor JADE ERICKSON TUITION 494 LOVEJOY RD SPARTA, TN 38583 4,659. JAMIE PIERCE TUITION 1501 5TH AVENUE MANCHESTER, TN 37355 2,386. JAMIE PIERCE TUITION 1501 5TH AVENUE MANCHESTER, TN 37355 2,386. JANA DENNING TUITION 151 LAKEVIEW DRIVE MCMINNVILLE, TN 37110 1,787. JANA DENNING TUITION 151 LAKEVIEW DRIVE 1,787. MCMINNVILLE, TN 37110 JASE HORNER TUITION 4422 HWY 128 LINDEN, TN 37096 3,411. JASE HORNER TUITION 4422 HWY 128 LINDEN, TN 37096 3,411. JASON HOANG TUITION 624 SUGAR MILL DR NASHVILLE, TN 37211 7,500. JASON HOANG TUITION 624 SUGAR MILL DR NASHVILLE, TN 37211 7,500. JED JENNER COMIA TUITION 1504 GOLDFINCH CIRCLE HERMITAGE, TN 37076 5,000. Total from continuation sheets

Part XIV Supplementary Information

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
JED JENNER COMIA			TUITION	
1504 GOLDFINCH CIRCLE				
HERMITAGE, TN 37076				5,000.
JESSICA MCWHIRTER			TUITION	
912 COVEMONT DRIVE			TOTTION	
FAYETTEVILLE, TN 37334				7,500.
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
JESSICA MCWHIRTER			TUITION	
912 COVEMONT DRIVE				
FAYETTEVILLE, TN 37334				7,500.
JOHANNA HALE			TUITION	
1712 COOK DRIVE				
LEBANON, TN 37087				7,500.
JOHANNA HALE			TUITION	
1712 COOK DRIVE				7 500
LEBANON, TN 37087				7,500.
JOHN RUTHERFURD			TUITION	
541 SUMMIT OAKS CT				
NASHVILLE, TN 37221				7,500.
JOHN RUTHERFURD			TUITION	
541 SUMMIT OAKS CT				
NASHVILLE, TN 37221				7,500.
JOHNVINDER BACHHAL 204 MOSLEY DR			TUITION	
SPRINGFIELD, TN 37172-4418				7,500.
,				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
JOHNVINDER BACHHAL			TUITION	
204 MOSLEY DR				
SPRINGFIELD, TN 37172-4418				7,500.
JUDAH SIEGAND			TUITION	
5743 BRENTWOOD MEADOWS CIR. BRENTWOOD, TN 37027				7,500.
Total from continuation sheets				7,500.

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor JUDAH SIEGAND TUITION 5743 BRENTWOOD MEADOWS CIR. BRENTWOOD, TN 37027 7,500. JUNIOR ACHIEVEMENT OF MIDDLE 501(C)(3) SUPPORT FOR FINANCE PARK TENNESSEE 120 POWELL PLACE NASHVILLE, TN 37204 15,000. KAREN SORIA TUITION 202 ALTA LOMA RD MADISON, TN 37115 7,500. KAREN SORIA TUITION 202 ALTA LOMA RD MADISON, TN 37115 7,500. KARTIK RACHAKONDA TUITION 16174 COLCHESTER PALMS DR TAMPA, FL 33647 7,500. KARTIK RACHAKONDA иотттип 16174 COLCHESTER PALMS DR TAMPA, FL 33647 7,500. KATHERINE THOMPSON TUITION 313 BURR OAK CT SPRING HILL, TN 37174 7,500. KATHERINE THOMPSON TUITION 313 BURR OAK CT 7,500. SPRING HILL, TN 37174 KATIE GARCIA TUITION 5119 HONEYBEE DRIVE MURFREESBORO, TN 37129 4,202. KATTE GARCIA TUITION 5119 HONEYBEE DRIVE MURFREESBORO, TN 37129 4,202. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor KATIE LI TUITION 101 MEADOWBROOK DRIVE CLARKSVILLE, TN 37042 7,500. KATTE LT TUITION 101 MEADOWBROOK DRIVE CLARKSVILLE, TN 37042 7,500. KAYLA STEVENSON TUITION 1037 LINDYN LEE WAY GALLATIN, TN 37066 3,988. KAYLA STEVENSON TUITION 1037 LINDYN LEE WAY GALLATIN, TN 37066 3,988. KEREN HERNANDEZ TUITION 4935 BARELLA DRIVE ANTIOCH, TN 37013 6,632. KEREN HERNANDEZ иотттип 4935 BARELLA DRIVE ANTIOCH, TN 37013 6,632. KIPP NASHVILLE 501(C)(3) SUPPORT FOR MASTER 123 DOUGLAS AVE TEACHERS PROGRAM AND MANAGING DIRECTOR OF NASHVILLE, TN 37207 HIGH SCHOOLS 300,000. KLARA HANNA ALLA TUITION 2202 BROADWAY ST. 3,692. NOLENSVILLE, TN 37135 KLARA HANNA ALLA TUITION 2202 BROADWAY ST. NOLENSVILLE, TN 37135 1,500. KIJARA HANNA ATITIA TUITION 2202 BROADWAY ST. NOLENSVILLE, TN 37135 3,692. Total from continuation sheets

Part XIV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor KLARA HANNA ALLA TUITION 2202 BROADWAY ST. NOLENSVILLE, TN 37135 3,640. KLARA HANNA ALLA TUITION 2202 BROADWAY ST. NOLENSVILLE, TN 37135 1,094. KLARA HANNA ALLA TUITION 2202 BROADWAY ST. NOLENSVILLE, TN 37135 18,848. KUNDIVY DAUDA TUITION 5545 OAK CHASE DRIVE NASHVILLE, TN 37013 7,500. KUNDIVY DAUDA TUITION 5545 OAK CHASE DRIVE NASHVILLE, TN 37013 7,500. KYLA O'GUIN TUITION 2609 HIGHWAY 100 CENTERVILLE, TN 37033 216. KYLA O'GUIN TUITION 2609 HIGHWAY 100 CENTERVILLE, TN 37033 1,053. KYLEA MICHAEL TUITION 201 JILLS LANDING WINCHESTER, TN 37398 7,500. KYLEA MICHAEL TUITION 201 JILLS LANDING WINCHESTER, TN 37398 7,500. LAUNNA ATKINSON TUITION 6887 WALNUT HILLS DR BRENTWOOD, TN 37027 7,500. Total from continuation sheets

Part XIV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor LAUNNA ATKINSON TUITION 6887 WALNUT HILLS DR BRENTWOOD, TN 37027 7,500. LAUREL NICHOLAS TUITION 104 DELLROSE DRIVE NASHVILLE, TN 37214 7,500. LAUREL NICHOLAS TUITION 104 DELLROSE DRIVE NASHVILLE, TN 37214 7,500. LAUREN MANSFIELD TUITION 113 WEST END AVENUE MCMINNVILLE, TN 37110 7,500. LAUREN MANSFIELD TUITION 113 WEST END AVENUE MCMINNVILLE, TN 37110 7,500. LAWRENCE COUNTY EDUCATION FOUNDATION 501(C)(3) SUPPORT FOR PO BOX 961 TRANSPORTATION AND LAWRENCEBURG, TN 38464 ATTENDANCE TO JA BIZTOWN 25,000. LEAD PUBLIC SCHOOLS 501(C)(3) SUPPORT FOR LEADERSHIP 2835 BRICK CHURCH PIKE AND PROFESSIONAL NASHVILLE, TN 37207 DEVELOPMENT. 260,000. LIAN SADER TUITION 7504 OAKHAVEN TRACE 7,500. NASHVILLE, TN 37209 LIAN SADER TUITION 7504 OAKHAVEN TRACE NASHVILLE, TN 37209 7,500. TITLY SMITTH TUITION 116 4TH AVENUE N LEWISBURG, TN 37091 7,500. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor LILY SMITH TUITION 116 4TH AVENUE N LEWISBURG, TN 37091 7,500. LINDSEY GARNER TUITION 5525 GRANBERRY HEIGHTS DR BRENTWOOD, TN 37027 4,382. LINDSEY GARNER TUITION 5525 GRANBERRY HEIGHTS DR BRENTWOOD, TN 37027 4,382. LINDSEY GARNER TUITION 5525 GRANBERRY HEIGHTS DR BRENTWOOD, TN 37027 3,950. LIPSCOMB UNIVERSITY 501(C)(3) SUPPORT FOR PRINCIPAL 1 UNIVERSITY PARK DR LEADERSHIP PROGRAM NASHVILLE, TN 37204 158,700. LIPSCOMB UNIVERSITY 501(C)(3) SUPPORT FOR PIONEROS 1 UNIVERSITY PARK DR PROGRAM NASHVILLE, TN 37204 285,000. LISA KIM TUITION 2405 ROLLETT CT NASHVILLE, TN 37211 15,000. LISA KIM TUITION 2405 ROLLETT CT NASHVILLE, TN 37211 15,000. MADISON GRIGSBY TUITION 225 AIRPORT RD WAVERLY, TN 37185 4,019. MADISON GRIGSBY TUITION 225 AIRPORT RD WAVERLY, TN 37185 4,019. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor MAKENNA REILLY TUITION 718 VANTREASE ROAD MADISON, TN 37115 5,000. MAKENNA REILLY TUITION 718 VANTREASE ROAD MADISON, TN 37115 1,250. MAKENNA REILLY TUITION 718 VANTREASE ROAD MADISON, TN 37115 1,250. MAKENZI BOURAS TUITION 158 HARGIS RD BUMPUS MILLS, TN 37028 3,873. MAKENZI BOURAS TUITION 158 HARGIS RD BUMPUS MILLS, TN 37028 3,873. MAKENZIE MCGUIRE TUITION 512 GRANWOOD BLVD OLD HICKORY, TN 37138 7,500. MAKENZIE MCGUIRE TUITION 512 GRANWOOD BLVD OLD HICKORY, TN 37138 7,500. MARCO DE LA CRUZ-VITELA TUITION 253 SAM ST 3,484. NASHVILLE, TN 37207 MARIAM ISKANDAR TUITION 2009 HAWKS NEST DR HERMITAGE, TN 37076 7,500. MARIAM ISKANDAR TUITION 2009 HAWKS NEST DR HERMITAGE, TN 37076 7,500. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor MARIO DEANDA TUITION 1330 SHERRELL RD HILLSBORO, TN 37342 4,712. MARIO DEANDA TUITION 1330 SHERRELL RD HILLSBORO, TN 37342 4,712. MARIZ YOSEF TUITION 6 WHITSETT RD NASHVILLE, TN 37210 7,500. MARIZ YOSEF TUITION 6 WHITSETT RD NASHVILLE, TN 37210 7,500. MARK WEISS TUITION 1002 HIGHLAND RD BRENTWOOD, TN 37027 7,500. MARK WETSS TUITION 1002 HIGHLAND RD BRENTWOOD, TN 37027 7,500. MARTHA O'BRYAN CENTER 501(C)(3) SUPPORT FOR ACADEMIC STUDENT UNIONS AT MNPS 711 SOUTH 7TH ST NASHVILLE, TN 37206 220,000. MARVIN BROWN TUITION 350 SHADOW CREEK DRIVE BRENTWOOD, TN 37027 15,000. MARVIN BROWN TUITION 350 SHADOW CREEK DRIVE BRENTWOOD, TN 37027 15,000. MARY BROWN TUITION 473 ANNIE ROONEY ROAD LAWRENCEBURG, TN 38464 7,500. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor MARY BROWN TUITION 473 ANNIE ROONEY ROAD LAWRENCEBURG, TN 38464 7,500. MAYA REILLY TUITION 718 VANTREASE RD NASHVILLE, TN 37115 3,868. MAYA REILLY TUITION 718 VANTREASE RD NASHVILLE, TN 37115 3,600. MAYA REILLY TUITION 718 VANTREASE RD NASHVILLE, TN 37115 3,600. MEGAN MCFAUL TUITION 3511 CHAPEL HILL ROAD CLARKSVILLE, TN 37040 7,500. MEGAN MCFAUL TUITION 3511 CHAPEL HILL ROAD CLARKSVILLE, TN 37040 7,500. MEGAN MERTES TUITION 7829 HARPETH VIEW DRIVE NASHVILLE, TN 37221 7,500. MEGAN MERTES TUITION 7829 HARPETH VIEW DRIVE NASHVILLE, TN 37221 7,500. MENA DOCE TUITION 81 KENDALL PARK DR. NASHVILLE, TN 37217 7,500. MENA DOCE TUITION 81 KENDALL PARK DR. NASHVILLE, TN 37217 7,500. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor MIA SHINES TUITION 826 OAK STREET FRANKLIN, KY 42134 3,750. MICHAEL MORGAN TUITION 4021 FREMANTLE CIRCLE SPRING HILL, TN 37174 7,500. MICHAEL MORGAN TUITION 4021 FREMANTLE CIRCLE SPRING HILL, TN 37174 7,500. MICHAELA BIANCO TUITION 201 PEACEFUL VALLEY LN MONTEREY, TN 38574 6,632. MICHAELA BIANCO TUITION 201 PEACEFUL VALLEY LN MONTEREY, TN 38574 6,632. MICHAELA BIANCO TUITION 201 PEACEFUL VALLEY LN MONTEREY, TN 38574 5,000. MICHELLE OIU TUITION 706 ROSSLARE CIRCLE BRENTWOOD, TN 37027 12,046. MICHELLE QIU TUITION 706 ROSSLARE CIRCLE BRENTWOOD, TN 37027 12,046. MILEN NEGASI TUITION 6025 POST RD. NASHVILLE, TN 37205 7,500. MINA SHAWKY TUITION 700 ELDON LN NOLENSVILLE, TN 37135 3,750. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor MINA SHAWKY TUITION 700 ELDON LN 3,750. NOLENSVILLE, TN 37135 MONTKA FOUAD TUITION 5128 SINGING HILLS DRIVE ANTIOCH, TN 37013 6,632. MONIKA FOUAD TUITION 5128 SINGING HILLS DRIVE ANTIOCH, TN 37013 6,632. NANCY TENNENT TUITION PO BOX 5000 AMHERST, MA 01002 7,500. NANCY TENNENT TUITION PO BOX 5000 AMHERST, MA 01002 7,500. NASHVILLE ADULT LITERACY COUNCIL 501(C)(3) SUPPORT FOR OPERATIONS (NALC) 4805 PARK AVENUE, STE 305 NASHVILLE, TN 37209 55,000. NASHVILLE CHAMBER PUBLIC BENEFIT 501(C)(3) SUPPORT TO EXPAND FOUNDATION DAVIDSON COUNTY 500 11TH AVE NORTH, NO 200 APPRENTICESHIPS NASHVILLE, TN 37203 110,000. NASHVILLE CLASSICAL 501(C)(3) SUPPORT FOR SCHOOL 2000 GREENWOOD AVE LEADERSHIP PIPELINE NASHVILLE, TN 37206 125,000. NASHVILLE INTERNATIONAL CENTER FOR 501(C)(3) SUPPORT FOR AFTER EMPOWERMENT (NICE) SCHOOL AND SUMMER 417 WELSHWOOD DR PROGRAM NASHVILLE, TN 37211 103,500. NATALIE RODRIGUEZ TUITION 322 SHADY CREEK LANE NASHVILLE, TN 37211 7,500. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor NATALIE RODRIGUEZ TUITION 322 SHADY CREEK LANE NASHVILLE, TN 37211 7,500. NATHAN SOLOMON TUITION 6416 HOLLY TRACE CT NASHVILLE, TN 37221 15,000. NATHAN SOLOMON TUITION 6416 HOLLY TRACE CT NASHVILLE, TN 37221 15,000. NDIDI MORGAN TUITION 1426 BELL TRACE DRIVE ANTIOCH, TN 37013 7,500. NDIDI MORGAN TUITION 1426 BELL TRACE DRIVE ANTIOCH, TN 37013 7,500. NEVAEH WALKER TUITION 354 HOWARD SWITCH ROAD HOHENWALD, TN 38462 4,381. NOAH BEATY TUITION 900 E FOX RIDGE RD COOKEVILLE, TN 38501 3,808. NOAH BEATY TUITION 900 E FOX RIDGE RD 3,808. COOKEVILLE, TN 38501 OWEN BURCH TUITION 880 DORTCH LANE NOLENSVILLE, TN 37135-9741 6,622. OWEN BURCH TUITION 880 DORTCH LANE NOLENSVILLE, TN 37135-9741 6,622. Total from continuation sheets

SCARLETT FAMILY FOUNDATION 20-1980932 Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor PARKER MEGGINSON TUITION 119 BENNINGTON CT N HENDERSONVILLE, TN 37075 5,000. PARKER MEGGINSON TUITION 119 BENNINGTON CT N HENDERSONVILLE, TN 37075 7,500. PARKER MEGGINSON TUITION 119 BENNINGTON CT N HENDERSONVILLE, TN 37075 7,500. PARTH PATEL TUITION PO BOX 69 WARTRACE, TN 37183 4,975. PARTH PATEL TUITION PO BOX 69 WARTRACE, TN 37183 4,975. PARWAN AHMED MACHINGAL TUITION 525 WHEATFIELD WAY NASHVILLE, TN 37209 8,736. PARWAN AHMED MACHINGAL TUITION 525 WHEATFIELD WAY NASHVILLE, TN 37209 8,736. PAUL AGAIBY TUITION 616 SUMMERBREEZE LN ANTIOCH, TN 37013 7,500.

PENCIL

PAUL AGAIBY

616 SUMMERBREEZE LN ANTIOCH, TN 37013

NASHVILLE, TN 37203

501(C)(3)

7199 COCKRILL BEND BOULEVARD

Total from continuation sheets

SUPPORT FOR OPERATIONS

7,500.

65,659.

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Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor PETROS PISINOS TUITION 915 NORTH JACKSON STREET TULLAHOMA, TN 37388 7,500. PETROS PISINOS TUITION 915 NORTH JACKSON STREET TULLAHOMA, TN 37388 7,500. PIERRE ZAKARIA TUITION 3129 BALLENGER DR NOLENSVILLE, TN 37135-9800 7,500. PIERRE ZAKARIA TUITION 3129 BALLENGER DR NOLENSVILLE, TN 37135-9800 7,500. POLA ABDELMESSIH TUITION 5517 ESCALADE MOUNT JULIT, TN 37122 7,500. POLA ABDELMESSIH TUITION 5517 ESCALADE MOUNT JULIT, TN 37122 7,500. POLICY INNOVATORS IN EDUCATION 501(C)(3) SUPPORT FOR 2023 PIE NETWORK (PIE) (IN-ACTIVE) NETWORK SUMMIT 1621 E HENNEPIN AVE, NO 295 MINNEAPOLIS, MN 55414 25,000. PURPOSE PREPARATORY ACADEMY 501(C)(3) SUPPORT FOR DEANS OF 220 VENTURE CIRCLE CURRICULUM AND NASHVILLE, TN 37228 INSTRUCTION AND INSTRUCTION LEADERS 334,000. REILLY ROBINSON TUITION 1027 JUNE WILDE RIDGE SPRING HILL, TN 37174 7,500. REILLY ROBINSON TUITION 1027 JUNE WILDE RIDGE SPRING HILL, TN 37174 7,500. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor RELAY GRADUATE SCHOOL OF EDUCATION 501(C)(3) SUPPORT FOR DAVIDSON (IN-ACTIVE) COUNTY OPERATIONS 25 BROADWAY, 3RD FLOOR NEW YORK, NY 10004 75,000. REPUBLIC SCHOOLS 501(C)(3) SUPPORT FOR EMERGING 3307 BRICK CHURCH PIKE LEADERS PROGRAM NASHVILLE, TN 37207 115,000. RILEY HILL TUITION 3120 BLACKWOOD DR NASHVILLE, TN 37214 1,208. RILEY HILL TUITION 3120 BLACKWOOD DR NASHVILLE, TN 37214 7,500. RILEY HILL TUITION 3120 BLACKWOOD DR NASHVILLE, TN 37214 7,500. ROCKETSHIP TENNESSEE 501(C)(3) SUPPORT FOR MASTER 350 TWIN DOLPHIN DR 109 LITERACY TEACHERS REDWOOD CITY, CA 94065 137,000. RUDRA PATEL TUITION 417 EAGLE RIDGE NASHVILLE, TN 37209 5,896. RUDRA PATEL TUITION 417 EAGLE RIDGE NASHVILLE, TN 37209 5,896. SADIE HARRIS TUITION 135 CROCKETT HILLS LN HUNTLAND, TN 37345 7,500. SAFA RECANY TUITION 4792 REISCHA DRIVE NASHVILLE, TN 37211 15,000. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor SAFA RECANY TUITION 4792 REISCHA DRIVE NASHVILLE, TN 37211 15,000. SAILOR ROOLEY TUITION 602 TIDESRIDGE CT MURFREESBORO, TN 37128 7,500. SAILOR ROOLEY TUITION 602 TIDESRIDGE CT MURFREESBORO, TN 37128 7,500. SARAH SMITH TUITION 1557 YORK RD CLARKSVILLE, TN 37042 3,270. SARAH SMITH TUITION 1557 YORK RD CLARKSVILLE, TN 37042 3,270. SAVANNAH WINFREE TUITION 2161 YAGER RD MCMINNVILLE, TN 37110 5,261. SAVANNAH WINFREE TUITION 2161 YAGER RD MCMINNVILLE, TN 37110 5,261. SEELY REDDING TUITION 619 BIRDIE DRIVE SPRING HILL, TN 37174 7,500. SEELY REDDING TUITION 619 BIRDIE DRIVE SPRING HILL, TN 37174 7,500. SERENITY DRISCOLL TUITION 1194 SUNSET RIDGE DR CROSSVILLE, TN 38571 1,753. Total from continuation sheets

Part XIV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor SETH TAYLOR TUITION 314 PROVIDENCE DRIVE LEBANON, TN 37087 7,500. SETH TAYLOR TUITION 314 PROVIDENCE DRIVE LEBANON, TN 37087 7,500. SHANEEL YOUNG TUITION 720 ROWAN DRIVE NASHVILLE, TN 37207 5,368. SHARON OGUNDOKUN TUITION 5051 MOUNTAIN SPRINGS RD. ANTIOCH, TN 37013 6,622. SHARON OGUNDOKUN TUITION 5051 MOUNTAIN SPRINGS RD. ANTIOCH, TN 37013 6,622. SHERLYN MARTINEZ TUITION 222 CHERRY DRIVE FRANKLIN, TN 37064 7,500. SHERLYN MARTINEZ TUITION 222 CHERRY DRIVE FRANKLIN, TN 37064 7,500. SOLYANA ASEFA TUITION 536 HAWK COVE SMYRNA, TN 37167 3,343. SOLYANA ASEFA TUITION 536 HAWK COVE SMYRNA, TN 37167 5,000. SOLYANA ASEFA TUITION 536 HAWK COVE SMYRNA, TN 37167 3,343. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor SOPHIA HACKETT TUITION 3807 BARLOW DRIVE NASHVILLE, TN 37211 15,000. SOPHIA HACKETT иотттип 3807 BARLOW DRIVE NASHVILLE, TN 37211 15,000. STATE COLLABORATIVE ON REFORMING 501(C)(3) SUPPORT FOR RESEARCH EDUCATION (SCORE) ON THE IMPACT OF COVID 1207 18TH AVE S, NO 326 19 ON CHARTER SCHOOLS NASHVILLE, TN 37212 25,000. STATE COLLABORATIVE ON REFORMING 501(C)(3) SUPPORT FOR LITERACY EDUCATION (SCORE) AND POST-SECONDARY 1207 18TH AVE S, NO 326 WORK NASHVILLE, TN 37212 250,000. STEM PREPARATORY ACADEMY 501(C)(3) SUPPORT FOR SCHOOL 1162 FOSTER AVE COUNSELORS NASHVILLE, TN 37211 160,000. STRIVE COLLEGIATE ACADEMY, INC 501(C)(3) SUPPORT FOR TEACHER 3055 LEBANON PIKE, STE 300 AND LEADER DEVELOPMENT NASHVILLE, TN 37214 AND COACHING 100,000. SYCAMORE INSTITUTE 501(C)(3) SUPPORT FOR RESEARCH 511 UNION ST, STE 540 ON PAYING FOR COLLEGE NASHVILLE, TN 37219 IN TENNESSEE. 47,400. TAMARA SMITH TUITION 38 W MOSS ESTATES DR MOSS, TN 38575 2,998. TAMARA SMITH TUITION 38 W MOSS ESTATES DR MOSS, TN 38575 2,998. TCAT NASHVILLE 501(C)(3) SUPPORT FOR MNPS DUAL 100 WHITE BRIDGE PIKE ENROLLMENT NASHVILLE, TN 37209 20,000.

Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor TEMIDAYO ADEWUYI TUITION 1300 TWIN CIRCLE DRIVE NASHVILLE, TN 37217 3,764. TEMIDAYO ADEWUYI TUITION 1300 TWIN CIRCLE DRIVE NASHVILLE, TN 37217 3,764. TENNESSEANS FOR QUALITY EARLY 501(C)(3) SUPPORT FOR BRIGHT EDUCATION- POLICY & RESEARCH START IN MIDDLE 22 N FRONT ST, STE 670 TENNESSEE MEMPHIS, TN 38103 100,000. TENNESSEE CHARTER SCHOOL CENTER 501(C)(3) SUPPORT FOR OPERATIONS (TCSC) 209 10TH AVE S 416 NASHVILLE, TN 37203 50,000. TENNESSEE EDUCATORS OF COLOR ALLIANCE 501(C)(3) SUPPORT FOR ASPIRING (TECA) LEADERS PROGRAM 1161 BUGGY COVE CLARKSVILLE, TN 37043 135,000. TNACHTEVES 501(C)(3) SUPPORT FOR EXPANSION PO BOX 2723 OF TRANSFER PILOT NASHVILLE, TN 37901 PROGRAM 25,000. TRENTON KELSEY TUITION 380 OLD POWERHOUSE ROAD LAWRENCEBURG, TN 38464 7,500. TRENTON KELSEY TUITION 380 OLD POWERHOUSE ROAD LAWRENCEBURG, TN 38464 7,500. VALOR COLLEGIATE ACADEMIES 501(C)(3) SUPPORT FOR 4527 NOLENSVILLE PIKE DEVELOPMENT OF COMPASS NASHVILLE, TN 37211 IN LEADERSHIP HS DIPLOMA 175,000. VALOR COLLEGIATE ACADEMIES 501(C)(3) SUPPORT FOR 4527 NOLENSVILLE PIKE DEVELOPMENT OF COMPASS NASHVILLE, TN 37211 IN LEADERSHIP HS DIPLOMA 175,000. Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor VICTORIA BROOKS TUITION 2635 PARK FARMS ROAD WOODLAWN, TN 37191 4,216. VICTORIA BROOKS TUITION 2635 PARK FARMS ROAD WOODLAWN, TN 37191 4,216. VICTORIA LIM TUITION 3028 COOKS LANDING CT. 7,500. HERMITAGE, TN 37076 VICTORIA LIM TUITION 3028 COOKS LANDING CT. HERMITAGE, TN 37076 7,500. XIYAN ZHU TUITION 70 MORNINGSIDE DR NEW YORK, NY 10027 15,000. XIYAN ZHU TUITION 70 MORNINGSIDE DR NEW YORK, NY 10027 15,000. XUAN YANG TUITION 5952 WESTHEIMER DR BRENTWOOD, TN 37027 7,500. XUAN YANG TUITION 5952 WESTHEIMER DR BRENTWOOD, TN 37027 7,500. YOUSAB GREES TUITION 532 AERIE LANDING ANTIOCH, TN 37013 7,500. YOUSAB GREES TUITION 532 AERIE LANDING ANTIOCH, TN 37013 7,500. Total from continuation sheets

Part XIV Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient YOUTH VILLAGES MIDDLE TENNESSEE 501(C)(3) SUPPORT FOR LIFESET 3310 PERIMETER HILL DRIVE SCHOLARS PROGRAM NASHVILLE, TN 37211 50,000. TUITION ZEEN TOVI 7687 CHARLOTTE PIKE NASHVILLE, TN 37209 7,500. ZEEN TOVI TUITION 7687 CHARLOTTE PIKE NASHVILLE, TN 37209 7,500. Total from continuation sheets

3 Grants and Contributions Approved for Futu	re Payment (Continuation)			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BOYS AND GIRLS CLUBS OF MIDDLE	or substantial contributor	501(C)(3)	MNPS IN-SCHOOL LITERACY PROGRAM	
1704 CHARLOTTE AVE, STE 200 NASHVILLE, TN 37203				186,350.
COMMUNITIES IN SCHOOLS OF TENNESSEE 1207 8TH AVE S NASHVILLE, TN 37212		501(C)(3)	SUPPORT FOR MIDDLE TENN RURAL COUNTIES INITIATIVES AND COLLEGE READINESS	20,000.
COMMUNITIES IN SCHOOLS OF TENNESSEE 1207 8TH AVE S NASHVILLE, TN 37212		501(C)(3)	SUPPORT FOR MIDDLE TENN RURAL COUNTIES INITIATIVES AND COLLEGE READINESS	100,000.
CONEXION AMERICA 2195 NOLENSVILLE PIKE NASHVILLE, TN 37211		501(C)(3)	SUPPORT FOR PARENTS AS	80,000.
CONEXION AMERICA 2195 NOLENSVILLE PIKE NASHVILLE, TN 37211		501(C)(3)	SUPPORT FOR ESCALERA	200,000.
CONEXION AMERICA 2195 NOLENSVILLE PIKE NASHVILLE, TN 37211		501(C)(3)	SUPPORT FOR ESCALERA	200,000
CONEXION AMERICA 2195 NOLENSVILLE PIKE NASHVILLE, TN 37211		501(C)(3)	SUPPORT FOR PARENTS AS	80,000.
CONEXION AMERICA 2195 NOLENSVILLE PIKE NASHVILLE, TN 37211		501(C)(3)	SUPPORT FOR PARENTS AS	80,000.
CONEXION AMERICA 2195 NOLENSVILLE PIKE NASHVILLE, TN 37211		501(C)(3)	SUPPORT FOR ESCALERA	200,000.
DIVERSE LEARNERS COOPERATIVE (DLC) 8011 BROOKS CHAPEL RD, STE 3083		501(C)(3)	SUPPORT FOR PROGRAM SPECIALISTS	
BRENTWOOD, TN 37027 Total from continuation sheets	<u> </u>			175,000. 10,462,877.

Part XIV Supplementary Information				
3 Grants and Contributions Approved for Futu		_		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
DIVERSE LEARNERS COOPERATIVE (DLC)		501(C)(3)	SUPPORT FOR PROGRAM	
8011 BROOKS CHAPEL RD, STE 3083			SPECIALISTS	
BRENTWOOD, TN 37027				175,000.
EDUCATION TRUST OF TENNESSEE (THE)		501(C)(3)	RESEARCH AND CONVENING	
1501 K ST. NW STE 200			ON K-12 AND HIGHER	
WASHINGTON, DC 20005			EDUCATION POLICY	50,000.
EDUCATORS' COOPERATIVE (EDCO) (THE)		501(C)(3)	SUPPORT FOR OPERATIONS	
1410 HEMLOCK AVENUE NASHVILLE, TN 37216				60,000.
NASHVILLE, IN 37210				00,000.
		E01 (a) (2)		
EQUAL CHANCE FOR EDUCATION 3715 WEST END AVE		501(C)(3)	SUPPORT FOR PROGRAM COORDINATOR AND MENTOR	
NASHVILLE, TN 37205			PROGRAM	105,000.
,				
FRANKLIN ROAD ACADEMY		501(C)(3)	SUPPORT FOR FRA SUMMER	
4700 FRANKLIN ROAD		501(C)(3)	INNOVATION INSTITUTE	
NASHVILLE, TN 37220			FOR MNPS STUDENTS	35,000.
FRANKLIN ROAD ACADEMY		501(C)(3)	SUPPORT FOR FRA SUMMER	
4700 FRANKLIN ROAD			INNOVATION INSTITUTE	
NASHVILLE, TN 37220			FOR MNPS STUDENTS	35,000.
GALLATIN SHALOM ZONE		501(C)(3)	SUPPORT FOR YOUTH	
600 SMALL STREET, STE 107			PROGRAM	
GALLATIN, TN 37066				25,000.
GOAL COLLECTIVE (FISCAL AGENT IS		501(C)(3)	SUPPORT FOR GOAL	
TCASN)			COLLECTIVE OPERATIONS	
1704 CHARLOTTE AVE, STE 200				50.000
NASHVILLE, TN 37220				50,000.
GOAL COLLECTIVE (FISCAL AGENT IS		501(C)(3)	SUPPORT FOR GOAL	
TCASN)			COLLECTIVE OPERATIONS	
1704 CHARLOTTE AVE, STE 200				_
NASHVILLE, TN 37220				50,000.
HARPETH HALL SCHOOL		501(C)(3)	SUMMER READING AND	
3801 HOBBS RD NASHVILLE, TN 37215			MATH PROGRAM FOR MNPS STUDENTS	15,000.
Total from continuation sheets		1	PIODENIO	13,000.
Total Holli Continuation SHEELS				

Part XIV Supplementary Information 3 Grants and Contributions Approved for Fu				
Recipient	If recipient is an individual,	Farm delian	Down and of word an	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	, recipioni		
HOMEWORK HOTLINE, INC.		501(C)(3)	SUPPORT FOR OPERATIONS	
2000 EDGEHILL AVE				
NASHVILLE, TN 37212				35,000.
HOMEWORK HOTLINE, INC.		501(C)(3)	SUPPORT FOR OPERATIONS	
4805 PARK AVENUE				35 000
NASHVILLE, TN 37209				35,000.
HORIZONS AT USN		501(C)(3)	SUPPORT FOR SUMMER	
2000 EDGEHILL AVE			HORIZONS HIGH SCHOOL	
NASHVILLE, TN 37212			PROGRAM FOR MNPS	
			STUDENTS	43,000.
WODEROVG 15 WC		501/51/21		
HORIZONS AT USN		501(C)(3)	SUPPORT FOR SUMMER	
2000 EDGEHILL AVE			HORIZONS HIGH SCHOOL	
NASHVILLE, TN 37212			PROGRAM FOR MNPS STUDENTS	43,000.
			STODENTS	43,000.
INSTRUCTION PARTNERS		501(C)(3)	INSTRUCTIONAL	
604 GALLATIN AVE, STE 202			LEADERSHIP DEVELOPMENT	250 000
NASHVILLE, TN 37206				250,000.
INTREPID COLLEGE PREP		E01/G)/2)	TEADED CUID CUDDODM FOR	
5432 BELL FORGE LANE EAST		501(C)(3)	LEADERSHIP SUPPORT FOR TEACHERS AND	
ANTIOCH, TN 37013			ADMINISTRATORS	62,500.
1111001, IN 07010				02,300.
INTREPID COLLEGE PREP		501(C)(3)	LEADERSHIP SUPPORT FOR	
5432 BELL FORGE LANE EAST		301(0)(3)	TEACHERS AND	
ANTIOCH, TN 37013			ADMINISTRATORS	62,500.
		504 (5) (0)		
JUNIOR ACHIEVEMENT OF MIDDLE		501(C)(3)	SUPPORT FOR FINANCE	
TENNESSEE 120 POWELL PLACE			PARK AND FTE PROGRAM MANAGER FOR RUTHERFORD	
NASHVILLE, TN 37204			COUNTY.	25,000.
-				
JUNIOR ACHIEVEMENT OF MIDDLE		501(C)(3)	SUPPORT FOR FINANCE	
TENNESSEE			PARK AND FTE PROGRAM	
120 POWELL PLACE			MANAGER FOR RUTHERFORD	
NASHVILLE, TN 37204			COUNTY.	50,000.
KIPP NASHVILLE		501(C)(3)	SUPPORT FOR MASTER	
123 DOUGLAS AVE			TEACHERS PROGRAM AND	
NASHVILLE, TN 37207			MANAGING DIRECTOR OF	
			HIGH SCHOOLS	350,000.
Total from continuation sheets				

3 Grants and Contributions Approved for Future	e Payment (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	rinount
KIPP NASHVILLE 123 DOUGLAS AVE NASHVILLE, TN 37207		501(C)(3)	SUPPORT FOR MASTER TEACHERS PROGRAM AND MANAGING DIRECTOR OF HIGH SCHOOLS	350,000
LAWRENCE COUNTY EDUCATION FOUNDATION PO BOX 961 LAWRENCEBURG, TN 38464		501(C)(3)	SUPPORT FOR TRANSPORTATION AND ATTENDANCE TO JA BIZTOWN	34,030.
LIPSCOMB UNIVERSITY 1 UNIVERSITY PARK DR NASHVILLE, TN 37204		501(C)(3)	SUPPORT FOR PRINCIPAL LEADERSHIP PROGRAM	158,700.
LIPSCOMB UNIVERSITY 1 UNIVERSITY PARK DR NASHVILLE, TN 37204		501(C)(3)	SUPPORT FOR PIONEROS PROGRAM	285,000.
MARTHA O'BRYAN CENTER 711 SOUTH 7TH ST NASHVILLE, TN 37206		501(C)(3)	SUPPORT FOR ACADEMIC STUDENT UNIONS AT MNPS	220,000.
MARTHA O'BRYAN CENTER 711 SOUTH 7TH ST NASHVILLE, TN 37206		501(C)(3)	SUPPORT FOR ACADEMIC STUDENT UNIONS AT MNPS	220,000.
MOSIAC CHANGEMAKERS 1131 4TH AVENUE SOUTH, STE 230 NASHVILLE, TN 37210		501(C)(3)	SUPPORT FOR LEADERSHIP DEVELOPMENT FOR EDUCATION CHANGEMAKERS OF COLOR	50,000.
MOSIAC CHANGEMAKERS 1131 4TH AVENUE SOUTH, STE 230 NASHVILLE, TN 37210		501(C)(3)	SUPPORT FOR LEADERSHIP DEVELOPMENT FOR EDUCATION CHANGEMAKERS OF COLOR	50,000.
NASHVILLE ADULT LITERACY COUNCIL (NALC) 4805 PARK AVENUE, STE 305 NASHVILLE, TN 37209		501(C)(3)	SUPPORT FOR OPERATIONS AND CAPACITY BUILDING	85,000.
NASHVILLE CHAMBER PUBLIC BENEFIT FOUNDATION 500 11TH AVE NORTH, NO 200 NASHVILLE, TN 37203		501(C)(3)	SUPPORT TO EXPAND DAVIDSON COUNTY APPRENTICESHIPS	115,000.

Part XIV Supplementary Information **Grants and Contributions Approved for Future Payment (Continuation)** If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor NASHVILLE CHARTER COLLABORATIVE (NCC) 501(C)(3) SUPPORT FOR OPERATIONS 1831 12TH AVE S 146 NASHVILLE, TN 37203 125,000. NASHVILLE CLASSICAL 501(C)(3) SUPPORT FOR APPRENTICE 2000 GREENWOOD AVE SCHOOL LEADERSHIP NASHVILLE, TN 37206 PROGRAM 375,000. NASHVILLE CLASSICAL 501(C)(3) SUPPORT FOR APPRENTICE 2000 GREENWOOD AVE SCHOOL LEADERSHIP NASHVILLE, TN 37206 PROGRAM 375,000. NASHVILLE CLASSICAL 501(C)(3) SUPPORT FOR APPRENTICE 2000 GREENWOOD AVE SCHOOL LEADERSHIP NASHVILLE, TN 37206 PROGRAM 375,000. 501(C)(3) SUPPORT FOR PARENT NASHVILLE P.R.O.P.E.L PARENT INSTITUTE, INC. ADVOCACY WORK (PROPEL) 615 MAIN STREET, STE 210 NASHVILLE, TN 37207 100,000. NASHVILLE PUBLIC EDUCATION FOUNDATION 501(C)(3) SUPPORT FOR OPERATIONS (NPEF) 500 11TH AVE NORTH, NO 200 NASHVILLE, TN 37203 100,000. NASHVILLE PUBLIC LIBRARY FOUNDATION 501(C)(3) SUPPORT FOR BEGIN (NPL) BRIGHT INITIATIVE 615 CHURCH STREET NASHVILLE, TN 37219 75,000. NASHVILLE PUBLIC LIBRARY FOUNDATION 501(C)(3) SUPPORT FOR BEGIN BRIGHT INITIATIVE 615 CHURCH STREET NASHVILLE, TN 37219 75,000. NASHVILLE SOFTWARE SCHOOL 501(C)(3) FINANCIAL SUPPORT FOR 301 PLUS PARK BLVD NO 300 STUDENTS WHO HAVE NASHVILLE, TN 37217 GRADUATED FROM A MIDDLE TN HIGH SCHOOL 50,000. NASHVILLE TEACHER RESIDENCY (NTR) 501(C)(3) SUPPORT FOR MIDDLE 1224 MARTIN ST TENNESSEE OPERATIONS NASHVILLE, TN 37203 200,000. Total from continuation sheets

20-1980932 SCARLETT FAMILY FOUNDATION Part XIV Supplementary Information **Grants and Contributions Approved for Future Payment (Continuation)** If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor NASHVILLE TEACHER RESIDENCY (NTR) 501(C)(3) SUPPORT FOR MIDDLE TENNESSEE OPERATIONS 1224 MARTIN ST NASHVILLE, TN 37203 200,000. OASIS CENTER, INC. 501(C)(3) SUPPORT FOR OASIS 1704 CHARLOTTE AVE 200 COLLEGE CONNECTION NASHVILLE, TN 37203 252,436. PENCIL 501(C)(3) SUPPORT FOR OPERATIONS 7199 COCKRILL BEND BOULEVARD AND CAPACITY BUILDING NASHVILLE, TN 37203 137,000. PURPOSE PREPARATORY ACADEMY 501(C)(3) SUPPORT FOR DEANS OF 220 VENTURE CIRCLE CURRICULUM AND NASHVILLE, TN 37228 TNSTRUCTION AND INSTRUCTION LEADERS 354,341. PURPOSE PREPARATORY ACADEMY 501(C)(3) SUPPORT FOR DEANS OF 220 VENTURE CIRCLE CURRICULUM AND NASHVILLE, TN 37228 INSTRUCTION AND INSTRUCTION LEADERS 344,020. REPUBLIC SCHOOLS 501(C)(3) SUPPORT FOR LEADERSHIP 3307 BRICK CHURCH PIKE DEVELOPMENT FOR NASHVILLE, TN 37207 ASSISTANT PRINCIPALS AND PRINCIPALS 110,000. ROCKETSHIP TENNESSEE 501(C)(3) SUPPORT FOR MASTER 350 TWIN DOLPHIN DR 109 LITERACY TEACHERS REDWOOD CITY, CA 94065 150,000.

501(C)(3)

501(C)(3)

501(C)(3)

ROCKETSHIP TENNESSEE

EDUCATION (SCORE)

1162 FOSTER AVE

NASHVILLE, TN 37211

NASHVILLE, TN 37212

350 TWIN DOLPHIN DR 109 REDWOOD CITY, CA 94065

1207 18TH AVE S, NO 326

STEM PREPARATORY ACADEMY

Total from continuation sheets

STATE COLLABORATIVE ON REFORMING

SUPPORT FOR MASTER LITERACY TEACHERS

SUPPORT FOR LITERACY

AND POST-SECONDARY

SUPPORT FOR SCHOOL

COUNSELORS

WORK

163,000.

250,000.

160,000.

Part XIV Supplementary Information **Grants and Contributions Approved for Future Payment (Continuation)** If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor STRIVE COLLEGIATE ACADEMY, INC 501(C)(3) SUPPORT FOR LEADERSHIP 3055 LEBANON PIKE, STE 300 DEVELOPMENT NASHVILLE, TN 37214 150,000. TCAT NASHVILLE 501(C)(3) SUPPORT FOR MNPS DUAL 100 WHITE BRIDGE PIKE ENROLLMENT NASHVILLE, TN 37209 60,000. TEACH FOR AMERICA 501(C)(3) SUPPORT FOR PROGRAMS NASHVILLE-CHATTANOOGA (TFA) 25 BROADWAY, 12TH FLOOR NEW YORK, NY 10004 425,000. SUPPORT FOR PROGRAMS TEACH FOR AMERICA 501(C)(3) NASHVILLE-CHATTANOOGA (TFA) 25 BROADWAY, 12TH FLOOR NEW YORK, NY 10004 500,000. TEACH FOR AMERICA 501(C)(3) SUPPORT FOR PROGRAMS NASHVILLE-CHATTANOOGA (TFA) 25 BROADWAY, 12TH FLOOR NEW YORK, NY 10004 375,000. TENNESSEE CHARTER SCHOOL CENTER 501(C)(3) SUPPORT FOR OPERATIONS (TCSC) 209 10TH AVE S 416 NASHVILLE, TN 37203 50,000. TENNESSEE COLLEGE ACCESS AND SUCCESS 501(C)(3) SUPPORT FOR MIRA NETWORK PROGRAM AND OPERATIONS 1704 CHARLOTTE AVENUE, STE 200 NASHVILLE, TN 37203 170,000. TENNESSEE EDUCATORS OF COLOR ALLTANCE 501(C)(3) SUPPORT FOR ASPIRING (TECA) LEADERS PROGRAM 1161 BUGGY COVE CLARKSVILLE, TN 37043 285,000. UPRISE NASHVILLE 501(C)(3) ADULT LEARNER TRAINING 235 WHITE BRIDGE PIKE CAMPS NASHVILLE, TN 37209 32,000.

Total from continuation sheets

Form **2220**Department of the Treasury Internal Revenue Service

SCARLETT FAMILY FOUNDATION

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

FORM 990-PF

OMB No. 1545-0123

Name

Go to www.irs.gov/Form2220 for instructions and the latest information.

 $Employer\ identification\ number \\ 20-1980932$

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

P	Part I Required Annual Payment							
1	Total tax (see instructions)						1	1,188,715.
0.0	ı Personal holding company tax (Schedule PH (Form 1120), lin	o 06)	included on line 1	1	ا مو			
	b Look-back interest included on line 1 under section 460(b)(2)			·····	2a		-	
	contracts or section 167(g) for depreciation under the income				2b			
	contracts of coolern for (g) for depreciation and of the moonie	1010						
C	Credit for federal tax paid on fuels (see instructions)			L	2c			
	Total. Add lines 2a through 2c						2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do	not	complete or file this form.	The corporat	tion			
	does not owe the penalty						3	1,188,715.
4	Enter the tax shown on the corporation's 2022 income tax retu							
	or the tax year was for less than 12 months, skip this line and	ente	r the amount from line 3 c	on line 5			4	141,771.
					_			
5	Required annual payment. Enter the smaller of line 3 or line			-			_ ا	1/1 771
P	enter the amount from line 3 Part II Reasons for Filing - Check the boxes belo		at apply. If any hoves are	chacked the	corporation	must file Form 2	220	141,771.
•	even if it does not owe a penalty. See instructions.	IVV LIIG	at apply. If ally boxes are	ciieckeu, iiie	corporation	must me rorm z	220	
6	The corporation is using the adjusted seasonal installr	ment	method					
7	X The corporation is using the annualized income install							
8	X The corporation is a "large corporation" figuring its first			n the prior ve	ar's tax.			
	Part III Figuring the Underpayment							
			(a)	(b	1)	(c)		(d)
9	Installment due dates. Enter in columns (a) through (d) the							
	15th day of the 4th (Form 990-PF filers: Use 5th month),							
	6th, 9th, and 12th months of the corporation's tax year $\hfill \ldots$	9	11/15/23	12/1	5/23	03/15/	24	06/15/24
10	Required installments. If the box on line 6 and/or line 7							
	above is checked, enter the amounts from Sch A, line 38. If							
	the box on line 8 (but not 6 or 7) is checked, see instructions							
	for the amounts to enter. If none of these boxes are checked,		25 442		0.01		6 0	006 600
	enter 25% (0.25) of line 5 above in each column	10	35,443.	66	<u>,981.</u>	1	63.	906,698.
11	Estimated tax paid or credited for each period. For							
	column (a) only, enter the amount from line 11 on line 15.		76 622	26	000			007 000
	See instructions	11	76,622.	∠0	,000.			907,000.
	Complete lines 12 through 18 of one column							
10	before going to the next column. Enter amount, if any, from line 18 of the preceding column	12		<u>Δ</u> 1	,179.	1	98.	35.
	Add lines 11 and 12	13			,179.		98.	907,035.
	Add amounts on lines 16 and 17 of the preceding column	14		<u> </u>	, _ , , , ,	_		30770331
	Subtract line 14 from line 13. If zero or less, enter -0-	15	76,622.	67	,179.	1	98.	907,035.
	If the amount on line 15 is zero, subtract line 13 from line			-	, -			, , , , , , , ,
	14. Otherwise, enter -0-	16			0.		0.	
17	Underpayment. If line 15 is less than or equal to line 10,							
	subtract line 15 from line 10. Then go to line 12 of the next							
	column. Otherwise, go to line 18	17						
18	Overpayment. If line 10 is less than line 15, subtract line 10							
	from line 15. Then go to line 12 of the next column	18	41,179.		198.		35.	

For Paperwork Reduction Act Notice, see separate instructions.

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Form 2220 (2023)

Form 2220 (2023)

Part IV Figuring the Penalty

			(a)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19				
20	Number of days from due date of installment on line 9 to the					
	date shown on line 19	20				
21	Number of days on line 20 after 4/15/2023 and before 7/1/2023	21				
22	Underpayment on line 17 x Number of days on line 21 x 7% (0.07)	22	\$	\$	\$	\$
23	Number of days on line 20 after 6/30/2023 and before 10/1/2023	23				
24	Underpayment on line 17 x Number of days on line 23 x 7% (0.07)	24	\$	\$	\$	\$
25	Number of days on line 20 after 9/30/2023 and before 1/1/2024	25				
26	Underpayment on line 17 x Number of days on line 25 x 8% (0.08)	26	\$	\$	\$	\$
27	Number of days on line 20 after 12/31/2023 and before 4/1/2024	27				
28	Underpayment on line 17 x Number of days on line 27 x 8% (0.08)	28	\$	\$	\$	\$
29	Number of days on line 20 after 3/31/2024 and before 7/1/2024	29				
30	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$	\$
31	Number of days on line 20 after 6/30/2024 and before 10/1/2024	31				
32	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$	\$
33	Number of days on line 20 after 9/30/2024 and before 1/1/2025	33				
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$
35	Number of days on line 20 after 12/31/2024 and before 3/16/2025	35				
36	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$	\$
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$
38	Penalty. Add columns (a) through (d) of line 37. Enter the to line for other income tax returns	tal he	ere and on Form 1120, li	ne 34; or the comparable		\$ 0.

^{*} Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 800-829-4933 to get interest rate information.

Form **2220** (2023)

Form 2220 (2023) FORM 990-PF Page 3

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method

Caution: Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

		(a)	(b)	(c)	(d)
1 Enter taxable income for the following periods.	[First 3 months	First 5 months	First 8 months	First 11 months
a Tax year beginning in 2020	1a				
b Tax year beginning in 2021	1b				
c Tax year beginning in 2022	1c				
2 Enter taxable income for each period for the tax year beginning in					
2023. See the instructions for the treatment of extraordinary items	2				
3 Enter taxable income for the following periods.		First 4 months	First 6 months	First 9 months	Entire year
a Tax year beginning in 2020	3a				
b Tax year beginning in 2021	3b				
c Tax year beginning in 2022	3c				
4 Divide the amount in each column on line 1a by the	[
amount in column (d) on line 3a	4				
5 Divide the amount in each column on line 1b by the					
amount in column (d) on line 3b	5				
6 Divide the amount in each column on line 1c by the					
amount in column (d) on line 3c	6				
7 Add lines 4 through 6	7				
3 Divide line 7 by 3.0	8				
9a Divide line 2 by line 8	9a				
b Extraordinary items (see instructions)	9b				
c Add lines 9a and 9b	9c				
Figure the tax on the amt on In 9c using the instr for Form					
1120, Sch J, line 1, or comparable line of corp's return \dots	10				
1 a Divide the amount in columns (a) through (c) on line 3a					
by the amount in column (d) on line 3a	11a				
b Divide the amount in columns (a) through (c) on line 3b					
by the amount in column (d) on line 3b	11b				
c Divide the amount in columns (a) through (c) on line 3c					
by the amount in column (d) on line 3c	11c				
2 Add lines 11a through 11c	12				
3 Divide line 12 by 3.0	13				
4 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter					
the amount from line 10, column (d)	14				
5 Enter any alternative minimum tax (trusts only) for each					
payment period. See instructions	15				
3 Enter any other taxes for each payment period. See instr.	16				
7 Add lines 14 through 16	17				
For each period, enter the same type of credits as allowed					
on Form 2220, lines 1 and 2c. See instructions	18				
9 Total tax after credits. Subtract line 18 from line 17. If	,,				
zero or less, enter -0-	19		<u> </u>	<u> </u>	Form 2220 (20

Form **2220** (2023)

Form 2220 (2023) FORM 990-PF Page 4

	* *
Part II	Annualized Income Installment Method

		(a)	(b)	(c)	(d)
		First 2	First 3	First 6	First 9
20 Annualization periods (see instructions)	20	months	months	months	months
21 Enter taxable income for each annualization period. See					
instructions for the treatment of extraordinary items	21	3,648,834.	3,684,316.	4,920,228.	54,457,985.
22 Annualization amounts (see instructions)	22	6.000000	4.000000	2.000000	1.333330
23a Annualized taxable income. Multiply line 21 by line 22	23a	21,893,004.	14,737,264.	9,840,456.	72,610,465.
b Extraordinary items (see instructions)	23b				
c Add lines 23a and 23b	23c	21,893,004.	14,737,264.	9,840,456.	72,610,465.
24 Figure the tax on the amount on line 23c using the					
instructions for Form 1120, Schedule J, line 1,					
or comparable line of corporation's return	24	304,313.	204,848.	136,782.	1,009,285.
25 Enter any alternative minimum tax (trusts only) for each					
payment period. See instructions	25				
26 Enter any other taxes for each payment period. See instr.	26				
20 Entor any other axes for each payment period. ese met.					
27 Total tax. Add lines 24 through 26	27	304,313.	204,848.	136,782.	1,009,285.
28 For each period, enter the same type of credits as allowed					
on Form 2220, lines 1 and 2c. See instructions	28				
29 Total tax after credits. Subtract line 28 from line 27. If					
zero or less, enter -0-	29	304,313.	204,848.	136,782.	1,009,285.
30 Applicable percentage	30	25%	50%	75%	100%
		76 070	100 404	100 507	1 000 205
31 Multiply line 29 by line 30	31	76,078.	102,424.	102,567.	1,009,285.
Part III Required Installments					
Note: Complete lines 32 through 38 of one column		1st	2nd	3rd	4th
before completing the next column.		installment	installment	installment	installment
32 If only Part I or Part II is completed, enter the amount in					
each column from line 19 or line 31. If both parts are					
completed, enter the smaller of the amounts in each		76,078.	102,424.	100 507	1,009,285.
column from line 19 or line 31	32	70,070.	102,424.	102,307.	1,009,203.
33 Add the amounts in all preceding columns of line 38. See instructions	33		35,443.	102,424.	102,587.
34 Adjusted seasonal or annualized income installments.					
Subtract line 33 from line 32. If zero or less, enter -0- \dots	34	76,078.	66,981.	163.	906,698.
35 Enter 25% (0.25) of line 5 on page 1 of Form 2220 in					
each column. Note: "Large corporations," see the		25 442	F F O O O O F	005 450	005 450
instructions for line 10 for the amounts to enter	35	35,443.	558,915.	297,179.	297,179.
36 Subtract line 38 of the preceding column from line 37 of the preceding column	36			491,934.	788,950.
and proceeding contains	30				
37 Add lines 35 and 36	37	35,443.	558,915.	789,113.	1,086,129.
38 Required installments. Enter the smaller of line 34 or					
line 37 here and on page 1 of Form 2220, line 10.		25 442	66 001	160	006 600
See instructions	38	35,443.	66,981.	163.	906,698.

Form **2220** (2023)

** ANNUALIZED INCOME INSTALLMENT METHOD USING STANDARD OPTION

FORM 990-PF	DIVIDENDS	AND IN	TEREST	FROM SEC	URITIES	SI	ATEMENT 1
SOURCE	GROSS AMOUNT	GAI			(B) NET INVE S MENT INC	ST-	
CARLYLE RSEF							
ELECTING INVESTORS A-II S.C.SP.	7,924.		0.	7.92	4. 7,9	24.	
EQUITABLE TRUST	5,064,222.		0.	5,064,22	2. 5,064,2	22.	
NGP NATURAL RESOURCES XII LP NGP NATURAL	7,398.		0.	7,39	8. 7,3	98.	
RESOURCES XIII	0 565		0	0 56		6	
PARALLEL FUND, LP STUDIO BANK	480.		0.		5. 8,5 0. 4	80.	
TO PART I, LINE 4	5,088,589.		0.	5,088,58	9. 5,088,5	89.	
•							
FORM 990-PF		ОТНЕ	ER INCO	ME		SI	ATEMENT 2
DESCRIPTION			RE	(A) VENUE BOOKS	(B) NET INVEST MENT INCOM	_	(C) ADJUSTED NET INCOME
ROYALTIES FROM NGP	NATURAL						
RESOURCES XII LP				31,806.	31,80	6.	
OTHER INCOME FROM N		_		757,272.	757,27	2.	
PFIC INCOME - ORDIN STATEMENTS				126,142.	126,14	2.	
OTHER LOSS FROM JET LP				-3,155.	-3,15	5.	
OTHER INCOME FROM C SBIC II LP		3		-66,319.	-66,31	9.	
OTHER INCOME FROM N RESOURCES XII LP	GP NATURAL			503,623.	503,62	3.	
TOTAL TO FORM 990-P	F, PART I, 1	LINE 11	. 1	,349,369.	1,349,36	 9.	
FORM 990-PF		LE	EGAL FE	ES		SI	ATEMENT 3
		(A)		(B)	(C)		(D)
DESCRIPTION		EXPENSE PER BOO	ES NE		ADJUSTE		CHARITABLE PURPOSES

5,532.

0.

5,532.

TO FM 990-PF, PG 1, LN 16A

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	39,950.	0.		39,950.	
TO FORM 990-PF, PG 1, LN 16B	39,950.	0.		39,950.	
FORM 990-PF C	THER PROFES	SIONAL FEES	S	TATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
SCHOLARSHIP PROGRAM MANAGEMENT FEES INVESTMENT MANAGEMENT FEES CONSULTING FEES OTHER MANAGEMENT FEES CONTRACT LABOR	24,550. 237,769. 112,625. 247,613. 12,175.	237,769. 0.		24,550. 0. 112,625. 0. 12,175.	
TO FORM 990-PF, PG 1, LN 16C	634,732.	485,382.		149,350.	
FORM 990-PF	TAX		Si	TATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAXES PAYROLL TAXES INCOME TAX	35,842. 26,262. 997,000.	35,842.		26,262. 0.	
TO FORM 990-PF, PG 1, LN 18	1,059,104.	35,842.		26,262.	

FORM 990-PF	OTHER E	XPENSES	S	STATEMENT 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
PERMITS AND LICENSES	21.	0.		21.		
DUES & SUBSCRIPTIONS	31,674.	0.		31,674.		
OFFICE SUPPLIES	1,842.	0.		1,842.		
OTHER DEDUCTIONS FROM						
INVESTMENT K-1'S	735,995.	735,995.		0.		
MARKETING EXPENSES	113,843.	0.		113,843.		
MISCELLANEOUS	4,494.	0.		4,494.		
BOARD MEETING EXPENSES	1,058.	0.		1,058.		
INSURANCE	3,425.	0.		3,425.		
HARDWARE & EQUIPMENT	4,682.	0.		4,682.		
POSTAGE & DELIVERY	3.	0.		3.		
COMPUTER SUPPLIES	750.	0.		750.		
AMORTIZATION	1,171.	0.		0.		
TO FORM 990-PF, PG 1, LN 23	898,958.	735,995.		161,792.		

FORM 990-PF OTHER INCREAS	SES IN NET AS	SETS OR FUND B	ALANCES	STATEMENT 8
DESCRIPTION				AMOUNT
TIMING DIFFERENCE FROM K-1 INVESTMENT VALUE DIFFERENCE ROUNDING	_	1,760,258. 57,749. 1.		
TOTAL TO FORM 990-PF, PART	III, LINE 3		=	1,818,008.
FORM 990-PF DEPRECIATION	OF ASSETS NO	T HELD FOR INV	ESTMENT	STATEMENT 9
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE	FAIR MARKET VALUE
WEBSITE DESIGN WEBSITE DESIGN WEBSITE DESIGN WEBSITE DESIGN WEBSITE DESIGN	2,854. 2,621. 208. 2,764. 7,023.	2,854. 2,621. 208. 2,764. 1,171.	0. 0. 0. 5,852.	0. 0. 0.
TO 990-PF, PART II, LN 14	15,470.	9,618.	5,852.	5,852.

P.O. BOX 23737

NASHVILLE, TN 372023737

JOSEPH H. SCARLETT, JR.

	OF OFFICERS, DIE FOUNDATION MANAGE		STAT	EMENT 13
NAME AND ADDRESS	TITLE AND AVRG HRS/WK			EXPENSE
TARA ANNE SCARLETT 4117 HILLSBORO PIKE, SUITE 103255 NASHVILLE, TN 37215	PRESIDENT/CEO 50.00	35,568.	28,850.	0.
DOROTHY F. SCARLETT 4117 HILLSBORO PIKE, SUITE 103255 NASHVILLE, TN 37215	DIRECTOR 0.00	0.	0.	0.
JOSEPH H. SCARLETT, JR. 4117 HILLSBORO PIKE, SUITE 103255 NASHVILLE, TN 37215-2728		0.	0.	0.
ANDREW S. SCARLETT 4117 HILLSBORO PIKE, SUITE 103255 NASHVILLE, TN 37215	DIRECTOR 0.00	0.	0.	0.
JENNIFER SCARLETT 4117 HILLSBORO PIKE, SUITE 103255 NASHVILLE, TN 37215-2728		0.	0.	0.
TOM PARRISH 4117 HILLSBORO PIKE, SUITE 103255 NASHVILLE, TN 37215-2728	SECRETARY 50.00	279,712.	28,849.	0.
MICHAEL PEACOCK 4117 HILLSBORO PIKE, SUITE 103255 NASHVILLE, TN 37215-2728	DIRECTOR 0.00	0.	0.	0.
KARLA JACKSON 4117 HILLSBORO PIKE, SUITE 103255 NASHVILLE, TN 37215-2728	DIRECTOR 0.00	0.	0.	0.
KERI RANDOLPH 4117 HILLSBORO PIKE, SUITE 103255 NASHVILLE, TN 37215-2728	DIRECTOR 0.00	0.	0.	0.
JAMIE WOODSON 4117 HILLSBORO PIKE, SUITE 103255 NASHVILLE, TN 37215-2728	DIRECTOR 0.00	0.	0.	0.

0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII

315,280. 57,699.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XIV, LINES 2A THROUGH 2D

STATEMENT 14

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SCARLETT FAMILY FOUNDATION - KATIE HAZELWOOD PO BOX 103255

NASHVILLE, TN 37215-2728

TELEPHONE NUMBER NAME OF GRANT PROGRAM

615-440-9183 COLLEGE SCHOLARSHIPS

EMAIL ADDRESS

INFO@SCARLETTFOUNDATION.ORG

FORM AND CONTENT OF APPLICATIONS

COLLEGE SCHOLARSHIP APPLICATIONS MAY BE ACCESSED ON-LINE AT WWW.SCARLETTFOUNDATION.ORG.

ANY SUBMISSION DEADLINES

SUBMISSION DEADLINE IS DECEMBER 15TH.

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE SCHOLARSHIP PROGRAM IS OPEN ONLY TO HIGH SCHOOL SENIORS, COLLEGE FRESHMAN, SOPHOMORES, AND JUNIORS FROM MIDDLE TENNESSEE WHO ARE PURSUING A BUSINESS STUDIES DEGREE OR STEM MAJOR ON A FULL TIME BASIS AT A 4 YEAR, NOT-FOR-PROFIT COLLEGE OR UNIVERSITY IN THE UNITED STATES. STUDENTS MUST EXHIBIT FINANCIAL NEED. ALL DETAILS ARE AVAILABLE ONLINE AT WWW.SCARLETTFOUNDATION.ORG.

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SCARLETT FAMILY FOUNDATION - TOM PARRISH PO BOX 103255 NASHVILLE, TN 37215-2728

TELEPHONE NUMBER NAME OF GRANT PROGRAM

615-440-9183 **GRANTS**

EMAIL ADDRESS

TOMPARRISH@SCARLETTFOUNDATION.ORG

FORM AND CONTENT OF APPLICATIONS

TO DETERMINE IF AN ORGANIZATION QUALIFIES - INTERESTED APPLICANTS ARE ENCOURAGED TO REVIEW THE WEBSITE (WWW.SCARLETTFOUNDATION.ORG)THEN CONTACT TOM PARRISH, CHIEF OPERATING OFFICER, BY EMAIL; TOMPARRISH@SCARLETTFOUNDATION.ORG.

ANY SUBMISSION DEADLINES

NO SUBMISSION DEADLINES.

RESTRICTIONS AND LIMITATIONS ON AWARDS

APPLICATION FOR A GRANT IS BY INVITATION ONLY.

2023 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1 990-PF

Asset No.	Description	Date Acquired	Method	Life	C o n v	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	WEBSITE DESIGN	07/01/08		3.00	НУ16	2,854.				2,854.	2,854.		0.	2,854.
2	WEBSITE DESIGN	11/25/08		3.00	НҮ16	2,621.				2,621.	2,621.		0.	2,621.
3	WEBSITE DESIGN	08/18/09		3.00	ну16	208.				208.	208.		0.	208.
4	WEBSITE DESIGN	10/01/11		3.00	ну16	2,764.				2,764.	2,764.		0.	2,764.
5	WEBSITE DESIGN	01/01/24		36 M	HY42	7,023.				7,023.			1,171.	1,171.
	* TOTAL 990-PF PG 1 DEPR & AMORT					15,470.				15,470.	8,447.		1,171.	9,618.
	CURRENT YEAR ACTIVITY													
	BEGINNING BALANCE					8,447.			0.	8,447.	8,447.			8,447.
	ACQUISITIONS					7,023.			0.	7,023.	0.			1,171.
	DISPOSITIONS/RETIRED					0.			0.	0.	0.			0.
	ENDING BALANCE					15,470.			0.	15,470.	8,447.			9,618.
	ENDING ACCUM DEPR										9,618.			
	ENDING BOOK VALUE										5,852.			

328111 04-01-23

⁽D) - Asset disposed

^{*} ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Form **990-W** (Worksheet)

Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations

► Keep for your records. Do not send to the Internal Revenue Service.

(and on Investment Income for Private Foundations) FORM 990-T

2024

1	Unrelated business taxable income expected in the tax ye	1					
2	Tax on the amount on line 1					2	
3	Alternative minimum tax for trusts	3					
4	Total. Add lines 2 and 3	4					
5	Estimated tax credits					5	
6	Subtract line 5 from line 4					6	
7	Other taxes					7	
8	Total. Add lines 6 and 7	8					
9	Credit for federal tax paid on fuels	9					
	Subtract line 9 from line 8. Note: If less than \$500, the oestimated tax payments Enter the tax shown on the 2023 return. Caution: If						
Ü	zero or the tax year was for less than 12 months, skip th			10b	91,624.		
C	2024 Estimated Tax. Enter the smaller of line 10a or line	e 10b. I	f the organization is requi	red to skip line 10b, enter	r the amount		
	from line 10a on line 10c	<u></u>				10c	91,640.
			(a)	(b)	(c)		(d)
11	Installment due dates	11	11/15/24	12/16/24	03/17/2	5	06/16/25
12	Installments. Enter 25% of line 10c in columns (a) through (d)	12	22,910.	22,910.	22,9	10.	22,910.
13	2023 Overpayment	13					
14	Payment due (Subtract line 13 from line 12)	14	22,910.	22,910.	22,9	10.	22,910. Form 990-W

Form **8879-TE**

THIS IS NOT A FILEABLE COPY *****
IRS E-file Signature Authorization
for a Tax Exempt Entity

For calendar year 2023, or fiscal year beginning JUL 1

, 2023, and ending \underline{JUN} 30

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form8879TE for the latest information.

Do not send to the IRS. Keep for your records.

Name of	filer	<u> </u>		EIN or SSN	
	SCARLETT FAMILY	FOUNDATION		20-198	0932
Name an	d title of officer or person subject to tax	TARA SCARLETT		•	
		PRESIDENT/CEO			
Part	Type of Return and Re	turn Information			
Form 53 or 10a t whiche	ne box for the return for which you a 30 filers may enter dollars and cents selow, and the amount on that line fo er is applicable, blank (do not enter e line in Part I.	. For all other forms, enter whol r the return being filed with this	e dollars only. If you check the b form was blank, then leave line	oox on line 1a, 2a, 3a, 1b, 2b, 3b, 4b, 5b, 6b	4a, 5a, 6a, 7a, 8a, 9a, , 7b, 8b, 9b, or 10b,
1a	Form 990 check here	b Total revenue, if any (Fo	rm 990, Part VIII, column (A), line	e 12) 1 b	
2a	Form 990-EZ check here	b Total revenue, if any (Fo	rm 990-EZ, line 9)	2t	
3a	Form 1120-POL check here		L, line 22)		·
4a	Form 990-PF check here		nt income (Form 990-PF, Part V	, line 5) 4 b	
5a	Form 8868 check here	b Balance due (Form 8868	, line 3c)	5b	
6a	Form 990-T check here X	b Total tax (Form 990-T, Pa	, line 3c) art III, line 4)	6b	91,624.
7a	Form 4720 check here		rt III, line 1)		
8a	Form 5227 check here	b FMV of assets at end of	tax year (Form 5227, Item D)	8b	
9a	Form 5330 check here	b Tax due (Form 5330, Par	t II, line 19)		·
	Form 8038-CP check here	b Amount of credit payme	ent requested (Form 8038-CP, F	Part III, line 22) 10	b
Part	Declaration and Signa	ture Authorization of Of	ficer or Person Subject t	o Tax	
compleinterme acknow of any rentry to financia later that paymer persona	ectronic return and accompanying so e. I further declare that the amount in diate service provider, transmitter, or ledgement of receipt or reason for refund. If applicable, I authorize the Uthe financial institution account indictinstitution to debit the entry to this an 2 business days prior to the payment of taxes to receive confidential information in the confidential information of the confidential informa	hedules and statements, and, the Part I above is the amount she electronic return originator (ERG lection of the transmission, (b). S. Treasury and its designated cated in the tax preparation soft account. To revoke a payment, ent (settlement) date. I also authormation necessary to answer income.	own on the copy of the electronical to send the return to the IRS at the reason for any delay in procession and the reason for any delay in procession and the federal and the	belief, they are true, coreturn. I consent to a and to receive from the essing the return or refectionic funds withdraw taxes owed on this reternation of the processing to the payment. I have to electronic funds with the enter my PIN	orrect, and llow my e IRS (a) an und, and (c) the date val (direct debit) urn, and the .88-353-4537 no
		ERO firm name			Enter five numbers, but do not enter all zeros
	as my signature on the tax year 20 with a state agency(ies) regulating on the return's disclosure consent As an officer or person subject to the return. If I have indicated within this IRS Fed/State program, I will enter	charities as part of the IRS Fed. screen. Eax with respect to the entity, I was return that a copy of the return my PIN on the return's disclosure.	State program, I also authorize will enter my PIN as my signature in is being filed with a state agenure consent screen.	the aforementioned EF e on the tax year 2023 ncy(ies) regulating char	RO to enter my PIN electronically filed
Signature Part			ILEABLE COPY ***	** Date	
ERO's I	EFIN/PIN. Enter your six-digit electro	nic filing identification			
	(EFIN) followed by your five-digit self		62844162 Do not enter a		
submitt	that the above numeric entry is my F ng this return in accordance with the s Returns.				
ERO's si	gnature ABIGAIL CAMP	BELL	Date	11/14/24	
					_
		ERO Must Retain This F			
	Do Not S	ubmit This Form to the	IRS Unless Requested T		
Car Dri	acy Act and Danorwork Poduction	A at Niation and instructions		_	orm 8879-TF (2023)

LHA 302521 01-05-24

Form	990-T Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))					OMB No. 1545-0047	
				0000			
	For calendar year 2023 or other tax year beginning JUL 1, 2023 , and ending JUN 30, 202					2023	
Departm Internal F	ent of the Treasury Revenue Service		Go to www.irs.gov/Form990T for instructions and the late Do not enter SSN numbers on this form as it may be made public if your or			Open to Public Inspection for 501(c)(3) Organizations Only	
A	Check box if address changed.		Name of organization (Check box if name changed and see instruction	ons.)	D Em	ployer identification number	
B Exe	mpt under section	Print	SCARLETT FAMILY FOUNDATION		2	0-1980932	
	501(c)(3)	or	Number, street, and room or suite no. If a P.O. box, see instructions.		E Gro	oup exemption number e instructions)	
	408(e) 220(e)	Type	4117 HILLSBORO PIKE, 103255		(300	a man denoma)	
	408A 530(a)		City or town, state or province, country, and ZIP or foreign postal code				
	529(a) 529A		NASHVILLE, TN 37215-2728		F 🗆	Check box if	
		C Bo		77,580.		an amended return.	
G Cr	neck organization	type	X 501(c) corporation 501(c) trust 401(a) trust	Other trust	State	college/university	
			6417(d)(1)(A) Applicable entity				
	neck if filing only to				t amo	ount from Form 3800	
			tation filing a consolidated return with a 501(c)(2) titleholding corporation	ition		1	
			ed Schedules A (Form 990-T)			<u> </u>	
	-		e corporation a subsidiary in an affiliated group or a parent-subsidiar	y controlled group?		Yes X No	
	e books are in car		d identifying number of the parent corporation LBMC T	elephone number 6	15_	377-4600	
Part			d Business Taxable Income	elepriorie number o	12-	377-4000	
1			ess taxable income computed from all unrelated trades or businesse	e (coo instructions)	1	437,304.	
2	_		ess taxable income computed from all difference trades of businesse		2	137/3010	
3	Add lines 1 and 2				3	437,304.	
4			(see instructions for limitation rules)		4	0.	
5			s taxable income before net operating losses. Subtract line 4 from lir		5	437,304.	
6			ting loss. See instructions		6	,	
7		•	ess taxable income before specific deduction and section 199A ded				
	Subtract line 6 from				7	437,304.	
8	Specific deduction	on (gen	erally \$1,000, but see instructions for exceptions)		8	1,000.	
9			eduction. See instructions		9		
10			lines 8 and 9		10	1,000.	
11	Unrelated busin	ess tax	cable income. Subtract line 10 from line 7. If line 10 is greater than		11	436,304.	
Part							
1	Organizations ta	axable	as corporations. Multiply Part I, line 11 by 21% (0.21)		1	91,624.	
2			rates. See instructions for tax computation. Income tax on the amo	unt on			
	Part I, line 11, fro	m: L	Tax rate schedule or Schedule D (Form 1041)		2		
3	Proxy tax. See in				3		
4			instructions		4		
	Alternative minim	num tax	·		5		
6			acility income. See instructions		7	91,624.	
7 Part	III Tax and		gh 6 to line 1 or 2, whichever applies			91,024.	
			orations attach Form 1118; trusts attach Form 1116)				
	Other credits (see		ation of				
	`		ctions) 1 Attach Form 3800 (see instructions) 1				
			imum tax (attach Form 8801 or 8827)				
e	Total credits. Ac	1e					
2	Subtract line 1e f	2	91,624.				
	Amount due from		,			,	
b	Amount due from	n Form		b			
С	Amount due from	n Form		:			
d	Amount due from	n Form		d			
е	Other amounts d	ue (see		e			
f	Total amounts du		3f	0.			
4	Total tax. Add lir	nes 2 a	nd 3f (see instructions).	red under			
			ıx amount here		4	91,624.	
5	Current net 965 t	ax liab	ility paid from Form 965-A, Part II, column (k)		5	0.	

Form 990-T (2023) Page 2

Part I	Tax and Payments (continued)							r age z
	Payments: Preceding year's overpayment cre	adited to the current ves	ır	6a				
	Current year's estimated tax payments. Chec	•		0a		1		
	applies	·	_	_{6b}				
						1		
	Foreign organizations: Tax paid or withheld a	t source (see instruction				1		
	Backup withholding (see instructions)					1		
	Credit for small employer health insurance pr					1		
	Elective payment election amount from Form					1		
						1		
	Payment from Form 2439					1		
	Credit from Form 4136 Other (see instructions)					1		
	Total payments. Add lines 6a through 6j					7		
	Estimated tax penalty (see instructions). Che				X	8		
	Tax due. If line 7 is smaller than the total of li					9	91	,624.
	Overpayment. If line 7 is larger than the total					10		,
	Enter the amount of line 10 you want: Credi t				Refunded	11		
Part I				tion (see	e instructions)			
1	At any time during the 2023 calendar year, d	d the organization have	an interest in o	r a signatu	re or other authority		Y	es No
	over a financial account (bank, securities, or	other) in a foreign count	ry? If "Yes," the	e organizati	ion may have to file			
	FinCEN Form 114, Report of Foreign Bank ar	nd Financial Accounts. I	f "Yes," enter th	ne name of	the foreign country			
	here							Х
2	During the tax year, did the organization rece	eive a distribution from,	or was it the gra	antor of, or	transferor to, a			
	foreign trust?							X
	If "Yes," see instructions for other forms the	organization may have t	o file.					
3	Enter the amount of tax-exempt interest rece	ived or accrued during t	he tax year		\$			
4	Enter available pre-2018 NOL carryovers here	s \$	Do not	include ar	ny post-2017 NOL ca	rryover		
	shown on Schedule A (Form 990-T). Don't red	duce the NOL carryover	shown here by	any deduc	ction reported on Par	t I, line	6.	
5	Post-2017 NOL carryovers. Enter the Busines	ss Activity Code and ava	ailable post-201	7 NOL carı	ryovers. Don't reduce	•		
	the amounts shown below by any NOL claim	ed on any Schedule A, I	Part II, line 17 fo	or the tax y	ear. See instructions			
	Business Activity C	ode			lable post-2017 NOL	carryo	ver	
				\$				
				\$				
				\$				
				\$				
Part \								
Provide	any additional information. See instructions.							
	Under penalties of perjury, I declare that I have examine					dge and b	elief, it is true,	
Sign	correct, and complete. Declaration of preparer (other th	an taxpayer) is based on all infor	mation of which prep	oarer has any k	_			1
Here			PRESII	DENT/C	CEO th	•	S discuss this re r shown below (s	
	Signature of officer	Date	Title	•			s)? X Yes	No
	Print/Type preparer's name	Preparer's signature		Date	Check	f PTI	N	
Paid					self-employed			
Prepa	rer ABIGAIL CAMPBELL			11/14/			012967	
Use O					Firm's EIN	6	2-1199	757
300 0	P.O. BOX	1869						
	Firm's address BRENTWOOD	, TN 37024-1	869		Phone no. (615	377-4	600
							000	· -

Form **990-T** (2023)

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

	tment of the Treasury al Revenue Service	Do not enter SSN numbers on this form as it		Open to Rublic Increation for				
1 A	Name of the organizatio	FAMILY FOUNDATION			B Employer ide 20-198			er
<u>C (</u>	Unrelated business a	activity code (see instructions) 90009	9		D Sequence:	1	of	1
E (Describe the unrelate	ed trade or business PASSTHROUGH	INC	OME FROM QUAL	IFIED PART	NEF	RSHIP	
		Trade or Business Income		(A) Income	(B) Expenses			Net
	Gross receipts or s	ales						
b	Less returns and allo	wances c Balance	1c					
2	Cost of goods sold	(Part III, line 8)	2					
3		act line 2 from line 1c	3					
4 a		come (attach Schedule D (Form 1041 or Form						
	1120)). See instruc	tions	4a					
b	Net gain (loss) (For	m 4797) (attach Form 4797). See instructions)	4b					
С			4c					
5		a partnership or an S corporation (attach TEMENT 15	5	437,304.			43	7,304.
6		IV)	6					
7		nced income (Part V)	7					
8		royalties, and rents from a controlled						
		/I)	8					
9		e of section 501(c)(7), (9), or (17)						
		VII)	9					
10		activity income (Part VIII)	10					
11		e (Part IX)	11					
12		instructions; attach statement)	12					
13		es 3 through 12	13	437,304.			43	7,304.
_	directly cor	s Not Taken Elsewhere. See instruction nected with the unrelated business in	ncome	•			must be	e
1		officers, directors, and trustees (Part X)				1		
2 3		S				3		
4		enance				4		
5	Interest (attach sta	tement). See instructions				5		
6						6		
7		h Form 4562). See instructions		1 _ 1		-		
8	•	h Form 4562). See instructions claimed in Part III and elsewhere on return				8b		
						9		
9 10		eferred compensation plans				10		
						11		
11 12		orograms				12		
13		penses (Part VIII)				13		
13 14	Other deductions (costs (Part IX)				14		
15	•					15		0.
16		s income before net operating loss deduction. S		line 15 from Part I line 1		''		
	CHICIALCA DUSINICAS	, incomo poloro noi opolalina 1033 acadellon. A	unuaul	IO HOILL ALLI, IIIIC I	o.	1		

For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 17 from line 16

Schedule A (Form 990-T) 2023

16

Deduction for net operating loss. See instructions

	1
Page	2

Part	III Cost of Goods Sold Enter met	hod of inventory valua	ation		rage Z
1	Inventory at beginning of year			1	
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year			_	
8	Cost of goods sold. Subtract line 7 from line 6. Enter				
9	Do the rules of section 263A (with respect to property	•			Yes No
Part					
1	Description of property (property street address, city, s	state, ZIP code). Chec	k if a dual-use. See instr	uctions.	_
	A				
	В				
	c 🗆				
	D				
		Α	В	С	
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
-	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
С	Total rents received or accrued by property.				
·	Add lines 2a and 2b, columns A through D				
	Add lines 2a and 2b, columns A through b				
3	Total rents received or accrued. Add line 2c, columns	Δthrough D. Enter her	re and on Part I line 6 o	olumn (Δ)	0.
Ū	Deductions directly connected with the income	Timough B. Enterner		oldifiif (A)	
4	in lines 2a and 2b (attach statement)				
7	in in 63 Za and Zb (attach Statement)				
5	Total deductions. Add line 4, columns A through D. E	nter here and on Part	Lline 6. column (R)		0.
Part		ee instructions)	., 2, 22 (2/		
1	Description of debt-financed property (street address,		Check if a dual-use. See	instructions	
•	A	o,, oo, ooo,.			
	В 🗆				
	c -				
	D				
		Α	В	С	
2	Gross income from or allocable to debt-financed	,			
_	property				
3	Deductions directly connected with or allocable				
3	to debt-financed property				
•	Straight line depreciation (attach statement)				
a					
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
_	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
_	financed property (attach statement)		 		
6	Divide line 4 by line 5	9	6 %	%	<u>%</u>
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D)	. Enter here and on Pa	art I, line 7, column (A)		0.
			 	ı	
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A the				0.
11	Total dividends-received deductions included in line	10			0.

Schedule A (Form 990-T) 2023

Part VI Inter		ities, Ro	oyalties, and Re	ents Fro	m Contro	led O	rganization	S (s	ee instruct	tions)		r age o
			_			E	xempt Contro	lled O	rganization	ns .		
Name of controlled organization		identification incon				al of specified nents made	5. Part of column 4 that is included in the controlling organization's gross income		in the aniza-			
(1)												
(2)												
(3)												
(4)												
= Tblade				 	Controlled Or			- 6 1				alore Affect and the sealth of
7. Taxable In	icome	in	Net unrelated acome (loss) e instructions)		otal of specif syments mad		that is inc controlling gross	luded	in the zation's		cor	ductions directly nnected with ne in column 10
(1)												
(2)												
(3)												
(4)												
							Add colum Enter here line 8, c	and o	n Part I,	Ent	er h	olumns 6 and 11. ere and on Part I, 8, column (B).
Totals									0.			0.
Part VII Inve	estment I	ncome	of a Section 50	1(c)(7), (9), or (17)	Orgar	nization (s	ee ins	tructions)			
	1. Desc	cription of i	income		2. Amou incon		3. Deduction directly connected (attach states	ected	4. Set- (attach st		′ I	5. Total deductions and set-asides (add cols 3 and 4)
(1)												
(2)												
(3)												
(4)					Add amou	ınto in						Add amounts in
Totals					column 2. here and or line 9, colu	Enter n Part I,						column 5. Enter here and on Part I, line 9, column (B).
Part VIII Ex	ploited Ex	xempt A	ctivity Income,	Other 1	Than Adve	rtising	g Income	see in	structions))		
1 Description	n of exploite	d activity:										
			e from trade or busi				•	. ,		2		
			h production of unre									
										3		
		unrelated	trade or business.	Subtract lir	ne 3 from line	2. If a (gain, complete					
lines 5 thro	•									4		
			s not unrelated busi							5		
			entered on line 5							6		
			act line 5 from line 6	-								
4. ⊑nter ne	e and on P	art II, III IE	12					<u> </u>		7		

Schedule A (Form 990-T) 2023

Part	IX	Advertising Income				
1	Na	me(s) of periodical(s). Check box if reporting two	o or more periodicals on a d	consolidated basis	•	
	Α					
	В					
	С					
	D					
Enter a	amou	unts for each periodical listed above in the corre	sponding column.			
		·	Α	В	С	D
2	Gro	oss advertising income				
		d columns A through D. Enter here and on Part			•	0.
а		Ğ	, , , , , , , , , , , , , , , , , , , ,			
3	Dir	ect advertising costs by periodical				
а		d columns A through D. Enter here and on Part	I, line 11, column (B)		<u> </u>	0.
		, and the second				
4	Ad	vertising gain (loss). Subtract line 3 from line				
		For any column in line 4 showing a gain,				
		mplete lines 5 through 8. For any column in				
		e 4 showing a loss or zero, do not complete				
		es 5 through 7, and enter -0- on line 8				
5		adership costs				
6		culation income				
7		cess readership costs. If line 6 is less than				
		e 5, subtract line 6 from line 5. If line 5 is less				
		an line 6, enter -0-				
8		cess readership costs allowed as a				
	de	duction. For each column showing a gain on				
	line	e 4, enter the lesser of line 4 or line 7				
а	Ad	d line 8, columns A through D. Enter the greater	r of the line 8a columns tota	al or -0- here and o	n	
		rt II, line 13				0.
Part		Compensation of Officers, Director	ors, and Trustees (se	ee instructions)		0.
Part		Compensation of Officers, Director		ee instructions)	3. Percentage	4. Compensation
Part		Compensation of Officers, Directors, Name	ors, and Trustees (se	ee instructions)		4. Compensation attributable to
		Compensation of Officers, Director		ee instructions)	3. Percentage of time devoted to business	4. Compensation
1)		Compensation of Officers, Director		ee instructions)	3. Percentage of time devoted to business	4. Compensation attributable to
1)		Compensation of Officers, Director		ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to
1) 2) 3)		Compensation of Officers, Director		ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to
1)		Compensation of Officers, Director		ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to
1) 2) 3) 4)	X	1. Name		ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to
1) 2) 3) 4)	X Ent	1. Name	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	pe instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
(1) (2) (3) (4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business
1) 2) 3) 4)	X Ent	1. Name er here and on Part II, line 1	2. Title	ee instructions)	3. Percentage of time devoted to business %	4. Compensation attributable to unrelated business

FORM 990-T (A)	INCOME (LOSS) F	ROM PARTNERSHIPS	STATEMENT 15
DESCRIPTION			NET INCOME OR (LOSS)
CAPITAL SPRING SBIC	-66,319.		
(LOSS)	S XII - ORDINARI BU	SINESS INCOME	503,623.
TOTAL INCLUDED ON SO	CHEDULE A, PART I, L	INE 5	437,304.
FORM 990-T DESCE SCHEDULE A	RIPTION OF ORGANIZAT BUSINESS A		STATEMENT 16

PASSTHROUGH INCOME FROM QUALIFIED PARTNERSHIP INTERESTS

TO FORM 990-T, SCHEDULE A, LINE E

Form **2220**Department of the Treasury Internal Revenue Service

SCARLETT FAMILY FOUNDATION

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

FORM 990-T

OMB No. 1545-0123

Nama

Go to www.irs.gov/Form2220 for instructions and the latest information.

Employer identification number 20-1980932

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

ŀ	Part I Required Annual Payment							
								01 604
1	Total tax (see instructions)						1	91,624.
9 :	a Personal holding company tax (Schedule PH (Form 1120), line	26)	included on line 1	2a	l			
	b Look-back interest included on line 1 under section 460(b)(2)						1	
•	contracts or section 167(g) for depreciation under the income			2b				
	continuous on coolien for (g) for appropriation and the mooning							
(c Credit for federal tax paid on fuels (see instructions)			2c				
	d Total. Add lines 2a through 2c						2d	
	Subtract line 2d from line 1. If the result is less than \$500, do							
	does not owe the penalty						3	91,624.
4	Enter the tax shown on the corporation's 2022 income tax retu	ırn. S	See instructions. Caution	: If the tax is zero				
	or the tax year was for less than 12 months, skip this line and	ente	the amount from line 3 of	on line 5			4	
5	Required annual payment. Enter the smaller of line 3 or line	4. If	the corporation is require	d to skip line 4,				04 604
	enter the amount from line 3						5	91,624.
ŀ	Part II Reasons for Filing - Check the boxes belo even if it does not owe a penalty. See instructions.	w tha	at apply. If any boxes are	checked, the corp	oration	must file Form 2	220	
6	The corporation is using the adjusted seasonal installr	nent	method.					_
7	X The corporation is using the annualized income install							
8	The corporation is a "large corporation" figuring its firs			n the prior year's	tax.			
F	Part III Figuring the Underpayment							
			(a)	(b)		(c)		(d)
9	Installment due dates. Enter in columns (a) through (d) the							
	15th day of the 4th (Form 990-PF filers: Use 5th month),							
	6th, 9th, and 12th months of the corporation's tax year \dots	9	11/15/23	12/15/	23	03/15/	24	06/15/24
10	Required installments. If the box on line 6 and/or line 7							
	above is checked, enter the amounts from Sch A, line 38. If							
	the box on line 8 (but not 6 or 7) is checked, see instructions							
	for the amounts to enter. If none of these boxes are checked,		_		_			
	enter 25% (0.25) of line 5 above in each column	10	3.		1.			
11	Estimated tax paid or credited for each period. For							
	column (a) only, enter the amount from line 11 on line 15.							
	See instructions	11						
	Complete lines 12 through 18 of one column							
	before going to the next column.							
	, , ,	12						
	Add lines 11 and 12	13			3.			
	Add amounts on lines 16 and 17 of the preceding column	14	0.		0.			
	Subtract line 14 from line 13. If zero or less, enter -0-	15	0.		0.			
16	If the amount on line 15 is zero, subtract line 13 from line	10			3.			
17	14. Otherwise, enter -0- Underpayment. If line 15 is less than or equal to line 10,	16			٦.			
17								
	subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17	3.		1.			
18	Overpayment. If line 10 is less than line 15, subtract line 10	1/	<u>J•</u>					
10	from line 15. Then go to line 12 of the next column	18						

For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2023)

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Part IV Figuring the Penalty

after the (C corpo and S co Form 99i instead 0 Number of date shown Underpayn Number of Underpayn Number of Underpayn Number of Underpayn Number of Underpayn	e date of payment or the 15th day of the 4th month close of the tax year, whichever is earlier. prations with tax years ending June 30 proprations: Use 3rd month instead of 4th month. 10-PF and Form 990-T filers: Use 5th month of 4th month.) See instructions			
 Number of date shown Number of date shown Number of Underpayn Underpayn Number of Underpayn Number of Underpayn Number of Underpayn 		19		
date shown 1 Number of 2 Underpayn 3 Number of 4 Underpayn 5 Number of 6 Underpayn 7 Number of 8 Underpayn 9 Number of 0 Underpayn 1 Number of 2 Underpayn 3 Number of 4 Underpayn 4 Underpayn 4 Underpayn	f days from due date of installment on line 9 to the			
2 Underpayn 3 Number of 4 Underpayn 5 Number of 6 Underpayn 7 Number of 8 Underpayn 9 Number of 0 Underpayn 1 Number of 2 Underpayn 3 Number of 4 Underpayn	/n on line 19	20		
3 Number of 4 Underpayn 5 Number of 6 Underpayn 7 Number of 8 Underpayn 9 Number of 0 Underpayn 1 Number of 2 Underpayn 3 Number of	f days on line 20 after 4/15/2023 and before 7/1/2023	21		
4 Underpayn 5 Number of 6 Underpayn 7 Number of 8 Underpayn 9 Number of 0 Underpayn 1 Number of 2 Underpayn 3 Number of	ment on line 17 x Number of days on line 21 x 7% (0.07)	22	\$ \$	\$ \$
5 Number of 6 Underpayn 7 Number of 8 Underpayn 9 Number of 0 Underpayn 1 Number of 2 Underpayn 3 Number of	f days on line 20 after 6/30/2023 and before 10/1/2023	23		
6 Underpayn 7 Number of 8 Underpayn 9 Number of 0 Underpayn 1 Number of 2 Underpayn 3 Number of 4 Underpayn	ment on line 17 x Number of days on line 23 x 7% (0.07)	24	\$ \$	\$ \$
7 Number of 8 Underpayn 9 Number of 0 Underpayn 1 Number of 2 Underpayn 3 Number of 4 Underpayn	f days on line 20 after 9/30/2023 and before 1/1/2024	25		
8 Underpayn 9 Number of 0 Underpayn 1 Number of 2 Underpayn 3 Number of 4 Underpayn	ment on line 17 x Number of days on line 25 x 8% (0.08)	26	\$ \$	\$ \$
 Number of Underpayn Number of Underpayn Number of Underpayn Underpayn Underpayn 	f days on line 20 after 12/31/2023 and before 4/1/2024	27		
 Underpayn Number of Underpayn Number of Underpayn 	ment on line 17 x Number of days on line 27 x 8% (0.08)	28	\$ \$	\$ \$
 Number of Underpaye Number of Underpaye 	f days on line 20 after 3/31/2024 and before 7/1/2024	29		
2 Underpayn3 Number of4 Underpayn	ment on line 17 x Number of days on line 29 x *%	30	\$ \$	\$ \$
3 Number of 4 Underpayn	f days on line 20 after 6/30/2024 and before 10/1/2024	31		
4 Underpayn	ment on line 17 x Number of days on line 31 x *%	32	\$ \$	\$ \$
	f days on line 20 after 9/30/2024 and before 1/1/2025	33		
5 Number of	ment on line 17 x Number of days on line 33 x *%	34	\$ \$	\$ \$
	f days on line 20 after 12/31/2024 and before 3/16/2025	35		
6 Underpayn	ment on line 17 x Number of days on line 35 x *%	36	\$ \$	\$ \$
7 Add lines 2	22, 24, 26, 28, 30, 32, 34, and 36	37	\$ \$	\$ \$

^{*} Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 800-829-4933 to get interest rate information.

Form **2220** (2023)

Form 2220 (2023) FORM 990-T Page 3

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method

Caution: Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

		(a)	(b)	(c)	(d)
1 Enter taxable income for the following periods.	[First 3 months	First 5 months	First 8 months	First 11 months
a Tax year beginning in 2020	1a				
b Tax year beginning in 2021	1b				
c Tax year beginning in 2022	1c				
2 Enter taxable income for each period for the tax year beginning in					
2023. See the instructions for the treatment of extraordinary items	2				
3 Enter taxable income for the following periods.		First 4 months	First 6 months	First 9 months	Entire year
a Tax year beginning in 2020	3a				
b Tax year beginning in 2021	3b				
c Tax year beginning in 2022	3c				
4 Divide the amount in each column on line 1a by the	[
amount in column (d) on line 3a	4				
5 Divide the amount in each column on line 1b by the					
amount in column (d) on line 3b	5				
6 Divide the amount in each column on line 1c by the					
amount in column (d) on line 3c	6				
7 Add lines 4 through 6	7				
3 Divide line 7 by 3.0	8				
9a Divide line 2 by line 8	9a				
b Extraordinary items (see instructions)	9b				
c Add lines 9a and 9b	9c				
Figure the tax on the amt on In 9c using the instr for Form					
1120, Sch J, line 1, or comparable line of corp's return $_{\dots}$	10				
1 a Divide the amount in columns (a) through (c) on line 3a					
by the amount in column (d) on line 3a	11a				
b Divide the amount in columns (a) through (c) on line 3b					
by the amount in column (d) on line 3b	11b				
c Divide the amount in columns (a) through (c) on line 3c					
by the amount in column (d) on line 3c	11c				
2 Add lines 11a through 11c	12				
3 Divide line 12 by 3.0	13				
4 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter					
the amount from line 10, column (d)	14				
5 Enter any alternative minimum tax (trusts only) for each					
payment period. See instructions	15				
3 Enter any other taxes for each payment period. See instr.	16				
7 Add lines 14 through 16	17				
For each period, enter the same type of credits as allowed					
on Form 2220, lines 1 and 2c. See instructions	18				
9 Total tax after credits. Subtract line 18 from line 17. If	,,				
zero or less, enter -0-	19		<u> </u>	<u> </u>	Form 2220 (20

Form **2220** (2023)

Form 2220 (2023) FORM 990-T Page 4

	* *
Part II	Annualized Income Installment Method

		(a)	(b)	(c)	(d)
		First 2	First 3	First 6	First 9
20 Annualization periods (see instructions)	20	months	months	months	months
21 Enter taxable income for each annualization period. See	20	montais	montais	montais	months
instructions for the treatment of extraordinary items	21	10.	10.	10.	10.
22 Annualization amounts (see instructions)	22	6.000000	4.000000	2.000000	1.333330
23a Annualized taxable income. Multiply line 21 by line 22	23a	60.	40.	20.	13.
b Extraordinary items (see instructions)	23b		±0.	20.	
c Add lines 23a and 23b	23c	60.	40.	20.	13.
24 Figure the tax on the amount on line 23c using the	200				
instructions for Form 1120, Schedule J, line 1,					
or comparable line of corporation's return	24	13.	8.	4.	3.
25 Enter any alternative minimum tax (trusts only) for each					
payment period. See instructions	25				
26 Enter any other taxes for each payment period. See instr.	26				
27. Total toy, Add lines 24 through 26	27	13.	8.	4.	3.
27 Total tax. Add lines 24 through 2628 For each period, enter the same type of credits as allowed	21	13.			<u>J.</u>
on Form 2220, lines 1 and 2c. See instructions	28				
29 Total tax after credits. Subtract line 28 from line 27. If	20				
zero or less, enter -0-	29	13.	8.	4.	3.
30 Applicable percentage	30	25%	50%	75%	100%
04 Multiplu line 00 hu line 00	31	3.	4.	3.	3.
31 Multiply line 29 by line 30	<u> </u>	J • [∓•	J•[<u>J•</u>
Part III Required Installments					
Note: Complete lines 32 through 38 of one column		1st	2nd	3rd	4th
before completing the next column.		installment	installment	installment	installment
32 If only Part I or Part II is completed, enter the amount in					
each column from line 19 or line 31. If both parts are					
completed, enter the smaller of the amounts in each		2		2	2
column from line 19 or line 31	32	3.	4.	3.	3.
33 Add the amounts in all preceding columns of line 38. See instructions	33		3.	4.	4.
34 Adjusted seasonal or annualized income installments.		_			
Subtract line 33 from line 32. If zero or less, enter -0	34	3.	1.	0.	0.
35 Enter 25% (0.25) of line 5 on page 1 of Form 2220 in					
each column. Note: "Large corporations," see the		00 006	00 006	00 006	00 006
instructions for line 10 for the amounts to enter	35	22,906.	22,906.	22,906.	22,906.
36 Subtract line 38 of the preceding column from line 37 of the preceding column	36		22,903.	45,808.	68,714.
the preceding column					
37 Add lines 35 and 36	37	22,906.	45,809.	68,714.	91,620.
38 Required installments. Enter the smaller of line 34 or					
line 37 here and on page 1 of Form 2220, line 10.	_	3.	1.	0.	0
See instructions	38	ا ، ا	1.	U •	0.

Form **2220** (2023)

** ANNUALIZED INCOME INSTALLMENT METHOD USING STANDARD OPTION

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Business or activity to which this form relates

23

990-PF **202**

2023
Attachment

OMB No. 1545-0172

Attachment Sequence No. **179** Identifying number

Department of the Treasury Internal Revenue Service Name(s) shown on return

Go to www.irs.gov/Form4562 for instructions and the latest information.

SCARLETT FAMILY FOUNDATION FORM 990-PF PAGE 1 20-1980932 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1,160,000. **1** Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 3 2,890,000. Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (a) Description of property 6 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 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2022 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 ... 12 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during **15** Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) MACRS Depreciation (Don't include listed property. See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2023 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use only - see instructions) (b) Month and (d) Recovery period (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction 3-year property 19a 5-year property b 7-year property C 10-year property d 15-year property 20-year property S/L 25 yrs. 25-year property g S/L 27.5 yrs MM Residential rental property h 27.5 yrs MM S/L S/L MM 39 vrs. i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs S/L 12-year b 30-year 30 yrs MM S/L С 40-vear 40 yrs MM S/L d Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 0. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 22 23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs

Part V

Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

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	c) of Section A	, all of S	ection B	, and S	Section C	if app	licable.						
	Section A -	Depreciation	on and Other	nforma	tion (Ca	ution:	See the	instruc	ctions for li	mits for	passeng	er autor	nobiles.)		
24	a Do you have evidence to s	support the bu	siness/investme	nt use cla	aimed?		Yes [No	24b If "Y	es," is t	he evide	nce writ	ten?	Yes [No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentag		(d) Cost or ther basis	1.0	(e) lasis for depousiness/invuse on	reciation restment	(f) Recovery period	Me	(g) ethod/ vention	Depr	(h) eciation uction	Elec sectio	(i) cted on 179 ost
25	Special depreciation allo	owance for q	ualified listed	oroperty	placed	in serv	ice durin	g the ta	ax year and	t t					
	used more than 50% in				•			•	•		25				
26	Property used more tha														
				6											
_		: :		6											
_		: :	1	6					1						
	Property used 50% or le								1						
21	Froperty used 30% or le	1							Τ	C/I					
_		1 1		6					1	S/L -					
_		i i		6		_			+	S/L -					
_			·	6					1	S/L -	T				
	Add amounts in column												I		
<u>29</u>	Add amounts in column	(i), line 26. E											29		
			S	ection	B - Infor	matio	n on Use	of Ve	hicles						
to :	your employees, first ans	wer the ques	stions in Section		a)	u meet	an excep	otion to	completir	<u> </u>	ection fo		vehicles.	(f	1
30	Total business/investment	miles driven d	uring the	1	icle 1	\/4	chicle 2	v	'ehicle 3		icle 4		icle 5	Vehic	-
50	year (don't include commu		J	VOII	IGIG I	V (illicio Z	 '	CITICIC O	VOI	icic T	VCII	1010 0	VCIII	JIC U
21	Total commuting miles														
	Total other personal (no														
	driven		•												
33	Total miles driven during														
	Add lines 30 through 32			<u> </u>	Τ	-	T	-	Т	1	Τ		Τ	1	
34	Was the vehicle availab	•		Yes	No	Yes	No.	Ye	s No	Yes	No	Yes	No	Yes	No
	during off-duty hours?														
35	Was the vehicle used pr														
	than 5% owner or relate						-				-		-		
36	Is another vehicle availa	ble for perso	onal												
	use?														
		Section C	- Questions f	or Empl	loyers W	Vho Pr	ovide Ve	hicles	for Use by	/ Their I	Employe	es			
An	swer these questions to o	determine if y	you meet an ex	ception	to com	pleting	Section	B for v	ehicles use	ed by en	nployees	who a	ren't		
mc	ore than 5% owners or rela	ated persons	S												1
37	Do you maintain a writte	en policy stat	tement that pro	ohibits a	ıll persor	nal use	of vehic	les, inc	luding con	nmuting	by your			Yes	No
	employees?														
38	Do you maintain a writte	en policy stat	tement that pro	ohibits p	ersonal	use of	vehicles	, excep	t commuti	ng, by y	our				
	employees? See the ins	tructions for	vehicles used	by corp	orate of	ficers,	directors	, or 1%	or more o	wners					
39	Do you treat all use of v	ehicles by er	mployees as pe	ersonal ı	use?										
40	Do you provide more that	an five vehic	les to your em	ployees,	obtain i	informa	ation fron	n your	employees	about					
	the use of the vehicles,	and retain th	e information	received	l?										
41	Do you meet the require														
	Note: If your answer to	37, 38, 39, 4	0, or 41 is "Ye	s," don'	t comple	ete Sec	tion B fo	r the c	overed veh	icles.					
P	art VI Amortization														
	(a) Description of	f costs	Date	(b) amortization		(C Amortiz	able		(d) Code		(e) Amortiza	ition	Ar	(f) nortization r this year	
	Amortization of seets the	ot books al	ring value 0000	begins tox voc	<u> </u>	amoı	arit		section		period or per	centage	TC	i uns year	
	Amortization of costs the						7 023	2		Τ	36M			1	171
177	EBSITE DESIGN		0.1	0124			7,023	٠ -			JOM	+		Ι,.	<u> 171.</u>
	Amandination of the		· · · · · · · · · · · · · · · · · · ·	<u> </u>								42			
	Amortization of costs th											43		1	171.
44	Total. Add amounts in o	column (t). Se	ee the instructi	ons for	wnere to	repor	l					44		<u> </u>	<u> </u>

Form **4626**

Department of the Treasury Internal Revenue Service **Alternative Minimum Tax-Corporations**

Attach to your tax return.

Go to www.irs.gov/Form4626 for instructions and the latest information.

OMB No. 1545-0123

2023

Employer identification number SCARLETT FAMILY FOUNDATION 20-1980932 Is the corporation filing this form a member of a controlled group treated as a single employer under sections 59(k)(1)(D) and 52? Yes If "Yes," the corporation must complete Part V listing the names, EINs, and separate company financial statement income or loss for each member of the controlled group treated as a single employer taken into account in the determination of "applicable corporation" under section 59(k)(1)(D). X No Is the corporation filing this form a member of a foreign-parented multinational group (FPMG) within the meaning of section 59(k)(2)(B)? If "Yes," the corporation must complete Part V listing the names, EINs, and separate company financial statement income or loss for each member of the FPMG under section 59(k)(2)(B) Applicable Corporation Determination (Report all amounts in U.S. dollars.) If you have already determined in current or prior years you are an applicable corporation, skip Part I and continue to Part II. (c) Third Preceding (a) First Preceding (b) Second Preceding Year Ended Year Ended Year Ended Net income or loss per applicable financial statement(s) (AFS) (see inst): Consolidated net income or loss per the AFS of the corporation 1a Include AFS net income or loss of other includible entities (add net income and subtract net loss) 1b Exclude AFS net income or loss of excludible entities (add net loss and subtract net income) 1c d Adjustment for certain consolidating entries (see instructions) 1d Specified additional net income or loss item B. Reserved for future use 1e AFS net income or loss of all entities in the test group before adjustments. Combine lines 1a through 1d 1f Adjustments: 2 a Financial statements covering different tax years 2a Corporations that are not included on the taxpayer's consolidated return (see instructions) 2b c Pro-rata share of net income from controlled foreign corporations for which the corporation is a U.S. shareholder. If zero or less, enter -0-(see instructions for special rules if completing this form for an FPMG) 2c Amounts that are not effectively connected to a U.S. trade or business (see instructions for special rules if completing this form for an FPMG) 2d Certain taxes (see instructions) 2е Patronage dividends and per-unit retain allocations (cooperatives only) 2f Alaska native corporations 2g Certain credits (see instructions) 2h Mortgage servicing income 2i Tax-exempt entities (organizations subject to tax under section 511) ... 2i 2k Depreciation Qualified wireless spectrum 21 Covered transactions 2m Adjustments related to bankruptcy and insolvency 2n Certain insurance company adjustments 20 Adjustment P - Reserved for future use 2p Adjustment Q - Reserved for future use 2q Adjustment R - Reserved for future use 2r s Adjustment S - Reserved for future use 2s Other (see instructions) 2z 3 Specified adjustment. Reserved for future use 3 4 Total adjustments. Combine lines 2a through 2z 4 AFSI. Combine lines 1f and 4 6 AFSI of first, second, and third preceding tax years. Combine columns (a), (b), and (c) of line 5 6 7 3-year average annual AFSI (see instructions)

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LHA For Paperwork Reduction Act Notice, see separate instructions.

316231 02-12-24

Form 4626 (2023)

Part	Applicable Corporation Determination (Report all amo	unts in U.S.	dollars.) (continued	d)	-
8	Is line 7 more than \$1 billion?		•	,	
	Yes. Continue to line 9.				
	No. STOP here and attach to your tax return.				
9	Is the corporation a member of an FPMG within the meaning of section	59(k)(2)(B)?			
	Yes. Continue to line 10.				
	No. Continue to Part II.				
			(a)	(b)	(c)
			First Preceding	Second Preceding	Third Preceding
			Year Ended	Year Ended	Year Ended
10	AFSI for purposes of the \$100 million test before adjustments:				
а	AFSI from line 5				
b	Aggregation differences (see instructions)	10b			
С	Total AFSI for purposes of the \$100 million test before adjustments.				
	Combine lines 10a and 10b	10c			
11	Adjustments:				
а	Income not effectively connected to a U.S. trade or business	11a			
b	Pro-rata share of CFC net income described in section 56A(c)(3)				
	(attach worksheet) (see instructions)	11b			
С	Reserved for future use - Other adjustments 1	11c			
d	Reserved for future use - Other adjustments 2	11d			
12	Total adjustments. Combine lines 11a and 11b	12			
13	Total AFSI for purposes of the \$100 million test. Combine lines				
	10c and 12	13			
14	AFSI of first, second, and third preceding tax years. Combine columns	(a), (b), and ((c) of line 13	14	
15	3-year average annual AFSI for purposes of the \$100 million test			15	
16	Is line 15 \$100 million or more?				
	Yes. Continue to Part II.				
	No. STOP here. Attach to your tax return.				
					F 4000 (0000)

Form **4626** (2023)

Pai	t II Corporate Alternative Minimum Tax	_	
1	Net income or loss per applicable financial statement(s) (AFS) (see instructions):		
а	Consolidated net income or loss per the AFS of the corporation	1a	436,304.
b	Include AFS net income or loss of other includible entities (add net income and subtract net loss)	1b	
С	Exclude AFS net income or loss of excludible entities (add net loss and subtract net income)	1c	
d	Adjustment for certain consolidating entries (see instructions)	1d	
е	Specified additional net income or loss item D. Reserved for future use	1e	
f	AFS net income or loss before adjustments. Combine lines 1a through 1d	1f	436,304.
2	Adjustments:		
а	Financial statements covering different tax years	2a	
b	Reserved for future use - Adjustment 2b	2b	
С	Corporations that are not included on the taxpayers - consolidated return (see instructions)	2c	
d	The corporation's distributive share of adjusted financial statement income of partnerships	2d	
е	Pro-rata share of net income from controlled foreign corporations for which the corporation is a U.S.		
	shareholder. If zero or less, enter -0 (See instructions)	2e	
f	Amounts that are not effectively connected to a U.S. trade or business	2f	
g	Certain taxes. Enter the amount from Part III, line 7	2g	
h	Patronage dividends and per-unit retain allocations (cooperatives only)	2h	
i	Alaska native corporations	2i	
i	Certain credits (see instructions)	2j	
k	Mortgage servicing income	2k	
- 1	Covered benefit plans described in section 56A(c)(11)(B)	21	
m	Tax-exempt entities (organizations subject to tax under section 511)	2m	
n	Depreciation	2n	
0	Qualified wireless spectrum	20	
р	Covered transactions	2p	
q	Adjustments related to bankruptcy and insolvency	2q	
r	Certain insurance company adjustments	2r	
s	AFSI adjustment S - Reserved for future use	2s	
t	AFSI adjustment T - Reserved for future use	2t	
u	AFSI adjustment U - Reserved for future use	2u	
z	Other (see instructions)	2z	
3	Total adjustments. Combine lines 2a through 2z	3	
4	AFSI before financial statement net operating loss carryover. Combine lines 1f and 3	4	436,304.
5	Financial statement net operating loss (FSNOL) (see instructions)	5	
6	AFSI. Subtract line 5 from line 4. If zero or less, enter -0-	6	436,304.
7	Multiply line 6 by 15% (0.15)	7	65,446.
8	Corporate alternative minimum tax foreign tax credit (CAMT FTC). Enter amount from Part IV, Section I, line 6 (see inst)	8	
9	Tentative minimum tax. Subtract line 8 from line 7. If zero or less, enter -0-)	9	65,446.
10	Regular tax liability (see instructions)	10	91,624.
11	Base erosion minimum tax (see instructions)	11	0.
12	Combine lines 10 and 11	12	91,624.
13	Alternative minimum tax. Subtract line 12 from line 9. If zero or less, enter -0 Enter here and on Form		
	1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return	13	0.
Pai	t III Adjustment for Certain Taxes Under Section 56A(c)(5)	T	
1	Current income tax provision - Foreign	1	
2	Current income tax provision - Federal	2	
3	Deferred income tax provision - Foreign	3	
4	Deferred income tax provision - Federal	4	
5	Income taxes included in equity method investment income	5	
	Adjustment A - Reserved for future use	6a	
	Adjustment B - Reserved for future use	6b	
	Adjustment C - Reserved for future use	6c	
	Adjustment D - Reserved for future use	6d	
	Adjustment E - Reserved for future use	6e	
	Adjustment F - Reserved for future use	6f	
_	Adjustment G - Reserved for future use	6g 6h	
	Adjustment H - Reserved for future use	6h	
_	Income taxes in other places Total. Combine lines 1 through 6z. Enter here and on Part II, line 2g	6z 7	
	Total. Combine lines it tillough oz. Enter here and on Faft II, lifle 2g		l

Page 4 Form 4626 (2023)

Pa	rt IV Alternative Minimum Tax - Corporations Foreign Tax Credit			
Sec	tion I - AMT Foreign Tax Credit			
1	Domestic corporation AMT foreign income taxes:			
а	Total foreign taxes paid or accrued as reported on Form 1118, Schedule B,			
	Part I, column 2(j) 1a			
b	Adjustment			
С	Adjustment			
d	Adjustment 1d			
е	Adjustment			
f	Adjustment If			
g	Adjustment 1g			
2	Total domestic corporation AMT foreign income taxes. Combine lines 1a through 1g		2	
3	Allowable controlled foreign corporation (CFC) AMT foreign income taxes:			
а	Pro-rata share of CFC AMT foreign income taxes from Part IV, Section II, line			
	11, column (n) 3a			
b	Carryover of excess foreign taxes (from Part IV, Section III, line 4, column (vii))			
С	Total CFC AMT foreign income taxes. Add lines 3a and 3b		3c	
d	Percentage specified in section 55(b)(2)(A)(i) 3d	15%		
е	Pro-rata share of CFC net income described in section 56A(c)(3) (attach			
	worksheet) (see instructions)			
f	CFC AMT foreign tax credit limitation (multiply line 3d by line 3e)		3f	
g	Allowable CFC AMT foreign income taxes (lesser of line 3c or line 3f)		3g	
4	CAMT FTC Line 4 - Reserved for future use		4	
5	CAMT FTC Line 5 - Reserved for future use		5	
6	Total AMT foreign income taxes. Combine lines 2 and 3g. Enter this amount on Part II, line 8		6	
				Form 4626 (2023)

Department of the Treasury Internal Revenue Service

Statement of Specified Foreign Financial Assets

▶ Go to www.irs.gov/Form8938 for instructions and the latest information.

Attach to your tax return.

or tax year beginning 07/01/23 and ending 06/30/24. For calendar year

OMB No. 1545-2195

Attachment Sequence No. 938

	it you	nave attached additio	nai statements, check here 🔼	<u>Number of additional </u>	ai statements
1	Name(s) shown on re	turn LETT FAMILY	FOUNDATION	2 Taxpay 20-1980	yer identification number (TIN) 0 9 3 2
3	Type of filer			•	
_	a Specified in	dividual b	Partnership c	Corporation	d Trust
4	If you checked box 3	a, skip this line 4. If yo	u checked box 3b or 3c, enter the i	name and TIN of the specified in	ndividual who closely holds the
	partnership or corpor	ation. If you checked b	oox 3d, enter the name and TIN of t	the specified person who is a co	urrent beneficiary of the trust.
	(See instructions for	definitions and what to	do if you have more than one spec	cified individual or specified per	rson to list.)
	a Name			b TIN	
P	art l Foreign De	posit and Custo	dial Accounts Summary		
5	Number of deposit a	counts (reported in Pa	art V)		>
6	Maximum value of all	deposit accounts			\$
7	Number of custodial	accounts (reported in I	Part V)		>
8	Maximum value of all				\$
9	Were any foreign dep	osit or custodial accor	unts closed during the tax year?		Yes X No
Pa	art II Other Fore	ign Assets Sumn	nary		
10	Number of foreign as	sets (reported in Part \	/I)		> 5
11	Maximum value of all	assets (reported in Pa	ırt VI)		\$ 2,499,276.
12	Were any foreign ass	ets acquired or sold du	uring the tax year?		Yes X No
Pa	art III Summary	of Tax Items Attri	butable to Specified Foreig	gn Financial Assets (se	e instructions)
	(a) Asset setagon:	(b) Tax item	(c) Amount reported on	Whe	ere reported
'	(a) Asset category	(b) Tax Item	form or schedule	(d) Form and line	(e) Schedule and line
13	Foreign deposit and	a Interest	\$		
	custodial accounts	b Dividends	\$		
		c Royalties	\$		
		d Other income	\$		
		e Gains (losses)	\$		
		f Deductions	\$		
		g Credits	\$		
14	Other foreign assets	a Interest	\$		
		b Dividends	\$		
		c Royalties	\$		
		d Other income	\$		
		e Gains (losses)	\$		
		f Deductions	\$		
		g Credits	\$		
Pa	art IV Excepted S	Specified Foreign	Financial Assets (see insti	ructions)	·
			on one or more of the following for	,	orms filed. You do not need to
•	ude these assets on Fo	•	· · ·		
	Number of Forms 352	•	16 Number of Forms 3520-	A 17	Number of Forms 5471
18	Number of Forms 862	1	19 Number of Forms 8865		
LHA	For Paperwork R	eduction Act Notice,	see the separate instructions.		Form 8938 (Rev. 11-2021)

Form	8938 (Rev. 11-2021)						Page 2
	rt V Detailed Information for Each Foreign Deposit	and C	ustodia	I Ac	count Included in th	ne Part I Su	
	(see instructions)						
If you	u have more than one account to report in Part V, attach a separate s	statemer	nt for each	addit	ional account. See instruc	ctions.	
20	Type of account a Deposit b Custodial			21	Account number or other	r designation	
22	Check all that apply a Account opened during tax year	b _	Account	t close	ed during tax year		
	c Account jointly owned with spouse	d _	No tax it	tem re	ported in Part III with resp	pect to this as	set
23	Maximum value of account during tax year						
24	Did you use a foreign currency exchange rate to convert the value of	of the ac	count into	U.S.	dollars?	Yes	No
25	If you answered "Yes" to line 24, complete all that apply.				T		
	(a) Foreign currency in which account is maintained (b) Foreign currency exconvert to U.S. dollars	xchange	rate used	to	(c) Source of exchange Treasury Department's I		
26a	Name of financial institution in which account is maintained		b	Glob	al Intermediary Identificat	ion Number (G	GIIN) (Optional)
27	Mailing address of financial institution in which account is maintain	ed. Num	ber, street	t, and	room or suite no.		
28	City or town, state or province, country, and ZIP or foreign postal c	ode					
Pa	rt VI Detailed Information for Each "Other Foreign	Asset ¹	" Includ	ed ir	the Part II Summa	ry (see ins	structions)
If you	uhave more than one asset to report in Part VI, attach a separate sta	atement 1	for each a	dditio	nal asset. See instructions	3.	
29	Description of asset		30 Ident	ifying	number or other designat	tion	
	CIFIED FOREIGN FINANCIAL ASSET				98-0330949		
31	Complete all that apply. See instructions for reporting of multiple ac	cquisitio	n or dispos	sition	dates.		
b	Date asset disposed of during tax year, if applicable						
<u>c</u>	<u> </u>	d	Check if	no tax	item reported in Part III v	vith respect to	this asset
	Maximum value of asset during tax year (check box that applies)		*			A.= A	
а		с 🗀	\$100,001		, ——	\$150,001 - \$2	200,000
	If more than \$200,000, list value					\$	es X No
	Did you use a foreign currency exchange rate to convert the value of lf you answered "Yes" to line 33, complete all that apply.	or the as	set into U.	.S. do	ııars?	<u> </u>	es X No
34	(a) Foreign currency in which asset is (b) Foreign currency ex	vehange	rato usod	to	(c) Source of exchange	rata usad if n	ot from LLS
	denominated convert to U.S. dollars	Acriange	rate useu	io	Treasury Department's I		
	denominated Solver to S.S. denais				Troubury Bopartment of	Darcad or the	1 13041 301 1100
35	If asset reported on line 29 is stock of a foreign entity or an interest	in a fore	eign entity,	, enter	the following information	for the asset.	
а	Name of foreign entity				(Optional)		
	CARLYLE STRUCTURED CREDIT FUND		<u> </u>		🗖 –		
	Type of foreign entity (1) X Partnership	(2)	_ Corpor	ation	(3) Trust	(4)	Estate
d	Mailing address of foreign entity. Number, street, and room or suite	e no.					
-	520 MADISON AVE 40TH FLOOR						
	City or town, state or province, country, and ZIP or foreign postal c	ode					
N	NEW YORK					100	
36	If asset reported on line 29 is not stock of a foreign entity or an inte						
	Note: If this asset has more than one issuer or counterparty, attach or counterparty. See instructions.	n a separ	ate staten	nent w	ith the same information	for each addit	ional issuer
9	Name of issuer or counterparty						
a	. ,	unterpar	tv				
h	Type of issuer or counterparty	z. ito pai	-,				
	(1) Individual (2) Partnership	(3)	Corpor	ation	(4) Trust	(5)	Estate
С	Check if issuer or counterparty is a U.S. person		eign perso		(-,	(3)	
	Mailing address of issuer or counterparty. Number, street, and room						

Form **8938** (Rev. 11-2021)

 $\boldsymbol{e}\,$ City or town, state or province, country, and ZIP or foreign postal code

e City or town, state or province, country, and ZIP or foreign postal code

Part VI O	ther Foreign Assets						
29 Descript	ion of asset		30	Identifying numbe	r or other des	ignation	
SPECI	FIED FOREIGN FINA	NCIAL ASSET		98-156791	6		
31 Comple	e all that apply						
a Date as:	et acquired during tax year, if app	licable			·····		
b Date as	set disposed of during tax year, if a	applicable			····· _		
	heck if asset jointly owned with sp		Check if n	no tax item reported	in Part III witl	h respect to	this asset
	m value of asset during tax year (c						
	- \$50,000 b \$50,001 - \$				- \$200,000	г.с	0 1 5 0
					<u> </u>		0,150.
		ate to convert the value of the asset in	nto U.S. do	ollars?	Ye:	s X	No
	swered "Yes" to line 33, complete			(0) 0			
	ign currency in which asset is	(2) Foreign currency exchange rate	used to	(3) Source of exc			
denomir	lated	convert to U.S. dollars		Treasury Departn	nent's Bureau	of the Fisc	ai Service
35 If asset	reported on line 29 is stock of a fo	reign entity or an interest in a foreign o	entity, ente	er the following infor	mation for the	e asset.	
	foreign entity	orginal areas of the second area consigning		N (Optional)		<u>- 455511</u>	
	LYLE RŚEF ELECTIN	G INVESTOR		(*1			
c Type of	foreign entity (1)	Partnership (2) C	orporation	n (3)	Trust	(4)	Estate
d Mailing	address of foreign entity. Number,	street, and room or suite no.					
1 <u>001</u>	PENNSYLVANIA AVE	NW STE 220 SOUTH					
	own, state or province, country, ar	nd ZIP or foreign postal code					
WASHI	NGTON	22224					
		20004					
	· ·	a foreign entity or an interest in a fore					
	this asset has more than one issue erparty. See instructions.	er or counterparty, attach a separate s	statement v	with the same infor	mation for eac	ch additiona	al issuer
a Name o	issuer or counterparty						
Check if	information is for	Issuer Counterparty					
b Type of	ssuer or counterparty					_	_
(1)	Individual (2)	Partnership (3) C	orporation	n (4)	Trust	(5)	Estate
	issuer or counterparty is a	U.S. person Foreign					
d Mailing	address of issuer or counterparty.	Number, street, and room or suite no.					
• City or t	own, state or province, country, ar	nd ZID or foreign postal code					
e ony ort	own, state or province, country, ar	iu zir orioreigii postai code					

Part VI Other Foreign Assets							
29 Description of asset			30 Ident	ifying numb	er or other	designation	
SPECIFIED FOREIGN FINANCI	AL ASSET		98-	-163075	55		
31 Complete all that apply							
a Date asset acquired during tax year, if applicab	le						
b Date asset disposed of during tax year, if applic	cable						
c Check if asset jointly owned with spouse	e d	Check	(if no tax	tem reporte	d in Part III	with respect	to this asset
32 Maximum value of asset during tax year (check	· · · · · ·		_	_			
a \$0 - \$50,000 b \$50,001 - \$100,0			d L		1 - \$200,00	0	
e If more than \$200,000, list value					. \$	Г	
33 Did you use a foreign currency exchange rate to		et into U.S	S. dollars?		🔲	Yes	X No
34 If you answered "Yes" to line 33, complete all the			1				
	Foreign currency exchange ra	ate used t				te used if not	
denominated	vert to U.S. dollars		Trea	asury Depart	ment's Bu	reau of the Fi	scal Service
35 If asset reported on line 29 is stock of a foreign	antity ar an interest in a farais	an antitu	antar tha f	allawing infe	rmation fo	r the ecent	
35 If asset reported on line 29 is stock of a foreigna Name of foreign entity	entity or an interest in a foreig		GIIN (Opti		ormation to	r the asset.	
CARLYLE RSEF ELECTING I	NVESTOR		Спи (Ори	Ullai)		_	
c Type of foreign entity (1) Par	tnership (2)	Corpora	tion	(3)	Trust	(4)	Estate
d Mailing address of foreign entity. Number, street	et, and room or suite no.						
1001 DEDUCATE ALL ALL	CMH 000 COTTMIT						
1001 PENNSYLVANIA AVE NW							
e City or town, state or province, country, and ZI	P or foreign postal code						
WASHINGTON	2000	1					
OC If another and an line OO is not stock of a form				la a fall ai.a.a	:	fa tla.a. a.a.a	-+
36 If asset reported on line 29 is not stock of a fore	-	-	•	_			
Note. If this asset has more than one issuer or or counterparty. See instructions.	counterparty, attach a separa	te stateme	ent with tr	le same inio	rmation for	each additio	orial issuer
a Name of issuer or counterparty							
Check if information is for Issu	uer Counterparty	<i>'</i>					
b Type of issuer or counterparty						_	
(1) Individual (2) Par	tnership (3)	Corpora	tion	(4)	Trust	(5)	Estate
c Check if issuer or counterparty is a	U.S. person Fore	ign persor	n				
d Mailing address of issuer or counterparty. Num	ber, street, and room or suite	no.					
City or town, state or province, country, and ZII	P or foreign postal code						
Cony or town, state or province, country, and 21	or lordigit postal code						

(Rev. November 2018) Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property to a Foreign Corporation ▶ Go to www.irs.gov/Form926 for instructions and the latest information.

▶ Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. **128**

Par	付 I U.S. Transferor Information (see instructions)				
	e of transferor CARLETT FAMILY FOUNDATION				r (see instructions)
			20-19		$\overline{}$
1	Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation?		X	es/	No
2	If the transferor was a corporation, complete questions 2a through 2d.				
а	If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by				
	five or fewer domestic corporations?			es/	X No
b	Did the transferor remain in existence after the transfer?		ΧY	es/	No
	If not, list the controlling shareholder(s) and their identifying number(s).				
	Controlling shareholder	Identif	fying nur	nber	
С	If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation If not, list the name and employer identification number (EIN) of the parent corporation.	?	XY	es es	∟ No
	Name of parent corporation E	IN of par	rent corp	poratio	on
d	Have basis adjustments under section 367(a)(4) been made?		Y	es/	X No
3	If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under complete questions 3a through 3d.	section 3	367),		
а	List the name and EIN of the transferor's partnership.				
	· · · · · · · · · · · · · · · · · · ·				
	Name of partnership	EIN of	f partner	ship	
	Did the partner pick up its prevete chara of sain on the transfer of partnership access?			/oc	X No
	Did the partner pick up its pro rata share of gain on the transfer of partnership assets?		=	es	==
	Is the partner disposing of its entire interest in the partnership?		Y	es es	X No
d	Is the partner disposing of an interest in a limited partnership that is regularly traded on an established			_	▼
Dox	securities market? † II Transferee Foreign Corporation Information (see instructions)		Y	es_	X No
Par		Τ			
4	Name of transferee (foreign corporation)		ntifying i		er, if any
_CA	ARLYLE PRIVATE EQUITY ACCESS FUND IV (PARALLELL) L.P.	 	14241		
	Address (including country) 11 PENNSYLVANIA AVE NW STE 220 S SHINGTON, DC 20004	5b Ref	erence II) numl	oer
7 CJ	Country code of country of incorporation or organization	1			
8	Foreign law characterization (see instructions) ARTNERSHIP				
9	Is the transferee foreign corporation a controlled foreign corporation?			es	X No
	1 04-01-23 LHA For Paperwork Reduction Act Notice, see separate instructions.				Rev. 11-2018)

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Totals

_		Form 926 (Rev. 11-2018)
	covered by section 367(e)(1)? See instructions	Yes	X No
21	Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation		
	property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?	Yes	☐ No
	Did the domestic corporation not recognize gain or loss on the distribution of property because the		
b	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)	\$	
	If "Yes," complete lines 20b and 20c.	· —	
	Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions)	=	X No
19	Did this transfer result from a change in entity classification?		X No
	Exchange gain under section 987		X No
	Recapture under section 1503(d)		X No
b	Gain recognition under section 904(f)(5)(F)		X No
а	Gain recognition under section 904(f)(3)	Yes	X No
 18	Indicate whether any transfer reported in Part III is subject to any of the following.	_	
17	Type of nonrecognition transaction (see instructions) > SECTION 351		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before 3.771 % (b) After 3.771 %		
40			
Par	t IV Additional Information Regarding Transfer of Property (see instructions)		
oup	plemental Fart III information nequired to be neported (see instructions)		
Sun	plemental Part III Information Required To Be Reported (see instructions)		
	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	. Yes	No
15	Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	Regulations section 1.367(d)-1(c)(3)(ii) \$\bigs\\$		
	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
d	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable		
	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	☐ No
	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?		☐ No
	reasonably anticipated to exceed 20 years?	Yes	☐ No
14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		

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Return by a U.S. Transferor of Property

to a Foreign Corporation

• Go to www.irs.gov/Form926 for instructions and the latest information.

▶ Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. **128**

Pai	rt I U.S. Transferor Information (see instructions)	
Name	e of transferor	Identifying number (see instructions)
	CARLETT FAMILY FOUNDATION	
		20-1980932
_	In the transferred and acciding 100% around foreign assumption that is not a controlled foreign assumption 0	Yes X No
1	Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation?	Yes A No
2	If the transferor was a corporation, complete questions 2a through 2d.	
а	If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by	
	five or fewer domestic corporations?	
b	Did the transferor remain in existence after the transfer?	X Yes No
	If not, list the controlling shareholder(s) and their identifying number(s).	
	Controlling shareholder Idea	ntifying number
С	If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation?	X Yes No
	If not, list the name and employer identification number (EIN) of the parent corporation.	
	Name of parent corporation EIN of	parent corporation
	Have basis adjustments under section 367(a)(4) been made?	Yes X No
<u> </u>	Thave basic adjustments and seed of soft and seed of the seed of t	
3	If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under sectio	n 267)
3		11 307),
	complete questions 3a through 3d.	
a	List the name and EIN of the transferor's partnership.	
	Name of partnership EIN	l of partnership
b	Did the partner pick up its pro rata share of gain on the transfer of partnership assets?	
	1 1 1	Yes X No
d	Is the partner disposing of an interest in a limited partnership that is regularly traded on an established	
	securities market?	Yes X No
Pai	rt II Transferee Foreign Corporation Information (see instructions)	
4	Name of transferee (foreign corporation) 5a I	dentifying number, if any
		, ,
CZ	ARLYLE PRIVATE EQUITY ACCESS BLOCKER FUND III, L.P. 98	-1332661
6	· · · · · · · · · · · · · · · · · · ·	Reference ID number
	O1 PENNSYLVANIA AVE NW STE 220 S	reference ib flumber
	SHINGTON, DC 20004	
7	Country code of country of incorporation or organization	
_Ci		
8	Foreign law characterization (see instructions)	
_ P <i>P</i>	ARTNERSHIP	
9	Is the transferee foreign corporation a controlled foreign corporation?	Yes X No

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	covered by section 367(e)(1)? See instructions	Yes	X No
21	Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation		
	property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?	Yes	☐ No
	Did the domestic corporation not recognize gain or loss on the distribution of property because the	-	
b	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)	. ▶\$	
	If "Yes," complete lines 20b and 20c.		
	Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions)	···· =	X No
19 19	Did this transfer result from a change in entity classification?		X No
	Exchange gain under section 987		X No
	Recapture under section 1503(d)		X No
b	Gain recognition under section 904(f)(5)(F)		X No
а	Gain recognition under section 904(f)(3)	Yes	X No
'' 18	Indicate whether any transfer reported in Part III is subject to any of the following.		
17	Type of nonrecognition transaction (see instructions) SECTION 351		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before 19.120 % (b) After 19.120 %		
Par	t IV Additional Information Regarding Transfer of Property (see instructions)		
Sup	plemental Part III Information Required To Be Reported (see instructions)		
		163	140
.0	time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?	Yes	No
15	Regulations section 1.367(d)-1(c)(3)(ii) \$\bigs\\$ Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any		
	to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in		
d	If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable		
	1.367(d)-1(c)(3)(ii) for any intangible property?	Yes	No
С	Did the transferor choose to apply the 20-year inclusion period provided under Regulations section		
b	At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?	Yes	☐ No
	reasonably anticipated to exceed 20 years?	Yes	No
14 a	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life		